

Doing my part to keep Gymnastics & More and my Child SAFE!

I want to do my part to help Gymnastics and More keep my child(ren), his/her classmates, the coaches, other families and everyone else at the gym as safe as possible under the Covid-19 pandemic. I have read, understood and agree to follow the following policies and procedures.

I understand and agree that:

- I will drop my child off and pick him/her up at the designated exit door to the gym.
- Only one parent or non-participating individual will be allowed to enter the building at the main entrance.
- I am required to wear a mask when entering Gymnastics and More.
- I am aware that my child may wear a mask but that he/she is not required to do so in the gym.
- I am aware that my child, staff and any other person entering the building will have their temperature taken.
- There will be no hands-on spotting for at least the first month Gymnastics and More re-opens.
- I will support the social distancing standard of 6' to 10' while at the gym.
- My child will have regular opportunities to use the hand sanitizing stations available in areas of the facility.
 - My child will use the restroom and wash his/her hands thoroughly before leaving home and while at the gym as needed.
- My child will bring his/her clearly marked bag containing a water bottle for drinking and 'GYM' shoes...slides or flip flops
- I agree to keep my child home if he/she or anyone in my family is coughing, has a temperature over 99.5, or other Covid-19 symptoms.
- I understand and agree that these procedures will change and evolve over time and that I will follow any new standards required by the State of Massachusetts and/or Gymnastics and More.

SPOTTING WAIVER:

I understand that the coaches and everyone at the gym will make a strong effort to maintain social distancing but that there will be times when incidental contact and less than prescribed physical distancing will occur. I am aware and agree that spotting is an essential part of training my gymnast in order to keep her safe and to prevent injury. I will allow my child to be spotted when spotting is necessary. I further understand that I am voluntarily allowing my child to participate in programs and activities offered by Gymnastics and More Inc., knowing that it is impossible to keep him/her, myself or anyone else who enters the gym completely safe from exposure to the Covid-19 virus. I accept that risk.

_____ Parent or Guardian Signature

Date

Print Parent Name _____

Child Name _____