



WEHL Tryout Guidelines

We are pleased to be able to open our WAHA/WEHL tryouts. We know the players want to get back on the ice as do we all; however, for everyone's health and safety during the present pandemic, modifications are necessary and must be followed to allow for a safe and healthy environment. The City, County, State and Ice facility has the right to suspend access to facilities if participants, teams or organizations are not in compliance.

The following will be followed at all times:

1. Concessions and shared snacks are not permitted.
2. Players should bring and use only their own water bottles.
3. Parents/Guardians will not be allowed in the facility.

I understand that the WAHA's WEHL tryout involves an element of risk or danger for all participants and may cause serious injury, death, or property loss. I also understand participation during the COVID-19 pandemic may result in further risk of health consequences. In exchange for the opportunity to participate in these tryouts, I agree to assume these risks for my family and skater(s), USA Hockey, WAHA, WEHL, its coaches, staff, board members, and other participants from any liability for injuries, health consequences, and damages sustained while participating in these programs. I understand and accept that players will be scrimmaging and have contact with other players on and off the ice.

Please return signed by Parent/Guardian and player:

Parent/Guardian Acknowledged: _____ Date: _____

Players Name Printed: _____ Age Group: _____

Players Acknowledged: _____ Date: _____

I hereby certify to the following:

In the past 24 hours I have experienced one or more of the following symptoms: Check one Yes No

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| <ul style="list-style-type: none">• Cough• Shortness of breath or difficulty breathing• Fever of 100.4° F (38° C) or above• Chills• Loss of taste or smell | <ul style="list-style-type: none">• Muscle aches or pains• Extreme tiredness• Headache• Sore throat• Any other flu-like symptoms, such as gastrointestinal upset, headache or fatigue |
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Within the last 14 days have you had close contact (within 6 feet or 2 meters for at least 15 minutes) with someone who has tested positive for COVID-19 virus or is suspected of having COVID-19? Check one YES NO

Have you traveled outside the country in the past 14 days to any regions affected by COVID-19? Check one YES NO

To be filled out by WEHL staff:

Player check in date/time: _____

Player Temperature: _____