

## 2020 Brookfield High School Summer Guidelines(Phase 2)

These are not practices but conditioning sessions where you can integrate sport-specific skill work and tactics.. **Summer sessions are VOLUNTARY for all athletes and coaches.** Voluntary participation does not guarantee a spot on a team roster.

All sessions must take place outside.

- No one will be allowed inside the school.
- Athletes must review and adhere to the Resocialization of Interscholastic Athletics and Activities Programs Guidelines. See, <a href="http://www.casciac.org/pdfs/CIACResocializationofAthleticsGuidance.pdf">http://www.casciac.org/pdfs/CIACResocializationofAthleticsGuidance.pdf</a>

Dates of conditioning sessions will be Monday, July 6th through Monday, August, 17.

- Training sessions must be staggered and will be scheduled through the athletic office.
- NO impromptu sessions will be allowed to ensure proper numbers and compliance with guidelines are adhered to.

Sessions are limited to a maximum of 60 minutes and a maximum of 3 times per week per cohort

- A cohort is made up of no more than 10 athletes
- No athlete may be added to the cohort once it has started meeting.
  - No substitutions. If an athlete is absent on a given day, the cohort would work with fewer numbers.
- There should be a minimum of a 15 minute break in between cohorts to allow for departure
  of one cohort and arrival and check-in of the next cohort without mixing.

Coaches are responsible for "checking-in" each athlete from each cohort every time they meet and record this process on the supplied check-in sheet. No athlete will be allowed to attend if any answer on the checklist is Yes or they state their temperature is above 100.3 degrees. Athletes must take their temperatures within one hour of reporting for conditioning.

All Social Distancing Guidelines must be adhered to at all times. A minimum of 6 feet will separate all student athletes and coaches.

Coaches are required to wear masks other than while demonstrating.

No handshake fist bumps or other physical contact (celebratory or otherwise) will be permitted

Athletes are required to wear masks upon arrival and departure and at all times other than while physically active.

Athletes are responsible to bring their own water

- There will be no sharing of any personal items.
- Athletes must wash/shower at home before each session and are strongly encouraged to wash/shower after each session
- No sharing of water bottles/receptacles or use of hydration apparatus.
  - Label water bottles (anything left behind will be thrown away on a daily basis)

School equipment may be used but it is encouraged that athletes bring/use their own equipment when possible.

- o If using school equipment, check out to one individual for the entirety of the program
- o All equipment must be sanitized after each individual use.

Portable Toilets with hand sanitizers will be available for use by students and coaches. Each person who uses a portable toilet will be required to wipe down handles and common areas after use.

Any athlete who will answer yes to any of the questions below must stay home and are prohibited from participation, report it to their coach, and be cleared by a doctor before returning.

Coaches are required to fill out the COVID-19 Athlete Monitoring Form on a daily basis. Athletes must answer all questions honestly and must take their temperatures within one hour of reporting for conditioning. Failure to do so will preclude participation.

No weight training can be performed with a spotter

No sharing of clothing, footwear, towels, water bottles or any other personal items will be allowed

# **COVID-19 Athlete/Coach Monitoring Form**

		Circle Yes/No below										
	Team-				Cohort-				Date-			
Name	Fever		Cough		Sore Throat		Shortness of Breath		Close contact, or cared for someone with COVID-19		Temp (if higher than 100.3°F)	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No		



## Brookfield High School 2020 Voluntary Out-of-Season Physical Fitness Program Parent/Athlete Consent Form

Student's name\_\_\_\_\_ Grade\_\_\_\_ Sport\_\_\_\_

provided not clack integration be intersed participantic. High (	IAC allows a school to conduct non-mandated out-of-season conditioning programs led students are not coerced and are voluntarily participating and as long as the programs interfere with any other educational, athletic or family commitments. This summer, the has expanded that opportunity to include limited sport-specific skill work that can be ated into physical conditioning activities. While we believe the program we are offering a beneficial to your child's growth and development, this program is not an cholastic athletic program. You should make certain your child is medically able to pate in the rigors of such a program. As parents, you assume full responsibility for the all well-being of your child and give him/her permission to participate in the Brookfield School optional out-of-season conditioning and skills program. Off-season conditioning not guarantee a spot on the roster.
progra inforn	agree to permit your child to participate in this voluntary out-of-season conditioning am during the summer of 2020, Brookfield High School also requires that you be need of, understand and confirm the COVID-19 related risks associated with this activity.
The a	tached Notice of Risk must also be signed and returned with this form.
	I/We give permission for my son/daughter to participate in a summer
	conditioning program realizing that such activities involve the potential for
	injury/illness, which is inherent in all sports and physical activities.  I/We give permission to the appropriate certified school staff or medical
Ц	personnel to render emergency treatment if required when associated with
	athletic injury or illness.
	I/We recognize that participation in the athletic program at Brookfield High
	School is a privilege, not a right, and that all CIAC and school regulations as well as team rules must be adhered to for continued participation.
	I/We hereby acknowledge that I/We have read and understand the Athletic
_	Handbook.
	My child has signed the Student Agreement.
	I have read and understand and signed the Notice of Risk.
	Signature of Parent/Guardian Date



#### STUDENT AGREEMENT

As an athlete of Brookfield High School, I am willing to participate in a planned out-of-season conditioning and skills program of my own free will and I am willing to abide to the following:

- I will attend only at times specified by my coach.
- I will honestly respond when asked about my health and wellness and abide by any other health and safety requirements set by Brookfield High School, the coach, public health officials and other federal, state and local agencies.
- I will bring equipment as directed by my coach but will not share any food, towels, water bottles, or any other personal items during these sessions.
- I will participate only under the supervision of a coach or certified adult.
- I understand that I will not be permitted to participate and that I must immediately notify my coach if any of the following applies:
  - I, or any individual in my household, has tested positive for COVID-19; is experiencing symptoms of COVID-19; or has experienced symptoms of COVID-19 in the preceding 14 days, including, but not limited to, fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and/or diarrhea.
  - I, or any individual in my household, has recently had close contact with a person infected with COVID-19.
- I understand that if I test positive for COVID-19 or experience signs or symptoms of COVID-19, I must immediately notify my coach and I may only participate in/return to this activity with a documented negative COVID-19 test result or a note from a healthcare provider clearing me to safely participate in/return to the activity.

Signature of Athlete	Date



### NOTICE OF RISK INFORMATION ABOUT COVID-19

COVID-19 is an illness caused by a virus that can spread from person to person. The symptoms of COVID-19 can range from mild to severe, appearing 2-14 days after exposure to the virus and may include, among other symptoms, fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and diarrhea. Some individuals with COVID-19 may not show symptoms and it may be spread even by people who are not displaying signs of illness. Because of its highly contagious and sometimes "hidden" nature, I understand that it is currently very difficult to control the spread of COVID-19 or to determine whether, where, or how a specific individual may have been exposed to the disease.

COVID-19 is a new disease and there is limited information regarding risk factors. Based on current information, people who are 65 years or older or people of any age with underlying medical conditions (such as chronic lung disease, moderate to severe asthma, serious heart conditions, severe obesity, diabetes, chronic kidney or liver disease, or those who are immunocompromised) may be at higher risk of experiencing severe illness as result of COVID-10. At this time, students living in households with individuals who are 65 years of age and older and/or with individuals who have higher risk for severe illness from COVID-19 (such as people with underlying medical conditions) are recommended to stay home.

There is currently no vaccine to prevent COVID-19. Due to its highly contagious nature, it is possible that contact with others, as well as with surfaces that have been exposed to the virus, can lead to infection. **The best way to prevent illness is to avoid being exposed to the virus that causes COVID-19.** The Centers for Disease Control (CDC) currently advises that individuals stay home as much as possible and avoid close contact with others and engage in social distancing.

The Brookfield Public Schools has put protocols and preventative measures in place that are consistent with applicable recommendations from public health officials and other federal, state and local agencies. These safety measures include, but are not limited to, requiring cloth face masks, social distancing, regular handwashing, avoiding the use of shared items and mandating regular screening of participants. Despite these protective measures, however, it remains possible for a student participating in any in-person program to become infected with COVID-19 or to infect others, even if a student is asymptomatic.

Additional information regarding COVID-19 is available on the following websites or upon request from the Brookfield Public Schools:

- CDC's website at https://www.cdc.gov/coronavirus/2019-nCoV/index.html
- CT Department of Public Health website at https://portal.ct.gov/Coronavirus

#### INFORMED CONSENT

In signing below, I attest that I am the parent/guardian of the above named student or the student (if over age 18) and that I have read the Notice of Risk and understand that the COVID-19 related risks associated with my/my child participating in the voluntary out-of-season physical fitness program. I further understand that the Brookfield Public Schools is closely monitoring this situation and reserves the right to cancel this activity at any time, with or without notice. In addition, I also acknowledge that the health and safety risks posed by COVID-19 cannot be completely eliminated, despite the implementation of reasonable and age-appropriate precautions and protocols. Finally, given the unknown nature of COVID-19, I understand that it is not possible to fully list each and every specific risk associated with COVID-19 and that neither the Brookfield Public Schools nor public health officials can guarantee that any student participating will not come into contact with someone with COVID-19 and/or contract such illness.

By opting to allow my child to participate in the above activity, I agree to abide by, and reinforce with my child, the importance of following the health and safety protocols that the School may require.

I understand that promoting public health is a shared responsibility and that every member of the Brookfield Public Schools community must do their part to minimize risks. I HAVE READ AND UNDERSTAND THE INFORMATION ABOUT COVID-19 AND ITS ASSOCIATED RISKS AND HEREBY CONSENT TO MY/MY CHILD (OR MYSELF IF I AM A STUDENT OVER THE AGE OF 18) PARTICIPATING IN VOLUNTARY IN-PERSON PROGRAMMING.

Parent/Guardian Signature	Date	
Parent/Guardian Printed Name		
Student Signature if Over 18	Date	
Student Printed Name		