

FARMER ACKNOWLEDGEMENT AND PLEDGE

All members of Township of Union Public Schools have an important role to play in keeping our fellow students and the Union community safe by doing our part to stop the spread of COVID-19. As a member of Union High School Athletics Program , I know that I must take steps to stay well in order to protect others and promote a safe return to campus for all Farmers. Because of this, I pledge to take responsibility for my own health and help stop the spread of the COVID-19.

Union's highest priority is the safety of its students, faculty, staff and visitors. I know that by engaging in school functions, including attending classes, pursuing my education, eating in the cafeteria, attending activities, participating in sports and recreation, I may be exposed to COVID-19 and other infections. I also understand that despite all reasonable efforts by the district, I can still contract COVID-19 and other infections. In order to reduce my risk, I agree to be an active participant in maintaining my own health, wellbeing and safety, as well as the safety of others, by following all the guidelines and expectations outlined by the District.

As more information is gathered and known, I understand that The Township of Union Schools may modify these guidelines and expectations. It is my responsibility to make every effort to keep myself apprised of these changes to protect myself and the community.

It is my Farmer Pledge to protect myself, my peers, and Union community by doing the following:

- Agree to testing for COVID-19 and potential subsequent self-quarantining if I am identified as a contact of anyone who has been determined to be positive for COVID-19.
- If I test positive for COVID-19,I agree to self-quarantine until:
 - My symptoms have resolved, and
 - o It has been at least 14 days since the start of my symptoms, and
 - I have a negative COVID-19 test result.
- Timely report any known or potential exposures to COVID-19 to the Athletic Training Staff or School Nurse
- Monitor for the following symptoms:

- o A fever of 100.4°F or higher
- Respiratory symptoms, such as dry cough or shortness of breath
- Sore throat
- Headache
- Body aches
- o Chills
- Loss of taste or smell
- If I develop the above symptoms, to contact my athletic trainer or school nurse, and to follow the medical staff's instructions which may include being tested for COVID- 19 and self-quarantining while the test results are pending, and/or being evaluated.
- Stay at home if I am feeling sick.
- Participate fully and honestly with the Athletic Training Staff or School Nurse for contact tracing to determine whom I might have potentially exposed to COVID-19.
- Wear a mask or the appropriate PPE in all public places.
- Practice physical distancing as much as possible.
- Frequently wash and/ or sanitize my hands.
- Keep my personal space, shared common space, and my belongings clean.

I understand COVID-19 is a highly contagious virus and it is possible to develop and contract the COVID--19 disease, even if I follow all of the safety precautions above and those recommended by the CDC, local health department, and others. I understand that although the district is following the coronavirus guidelines issued by the CDC and their experts to reduce the spread of infection, I can never be completely shielded from all risk of illness caused by COVID-19 or other infections.

I have read, understand, and agree to comply with my Farmer Pledge above. I also acknowledge that these expectations and pledge are a condition of my participation in Union High School Athletics and that any failure to comply with my Farmer Pledge above may lead to immediate removal of athletic participation privileges and/ or the inability to use Athletics facilities.

Please return this form to your coach the following day

I take my Farmer Pledge seriously and will d Community.	o my part to protect the Union Farmer
Student-Athlete Name PRINTED	
Student-Athlete Signature	
Parent/Guardian Signature	