



ADDITIONAL DECLARATION FORM FOR VbDC CAMPS DURING COVID-19

The delivery of the VbDC Camps has been adjusted to fully comply with ACS’s enhanced Campus security protocols and the published guidance from Volleyball England “Return to Indoor Volleyball”, dated 24th July 2020. Whilst Volleyball England have provided guidance to training providers to mitigate risk so far as reasonably practicable, there will be an element of risk involved in attending the training course and assessment.

Tick Box	
	I understand that I must complete an ACS Covid-19 Declaration Form prior to the first day of the course.
	I understand that I will not be permitted access to the Campus more than 15mins prior to the start time of the camp on each day and must exit the Campus as soon as each day of the camp has concluded.
	I understand that that I must use Car Park B if driving myself to the Campus and if being dropped off by Parent/Guardian that they must not leave their vehicle and should leave Campus as soon as they have dropped me off.
	I understand and agree to an infra-red temperature check on arrival at the Sports Centre on each day of the course and that I will be asked to leave Campus if a temperature of 37.8°c or more is recorded.
	I understand that if I feel ill with any of the recognised Covid-19 symptoms at any stage during the course then I should inform the Coach immediately so I can be isolated from the other athletes.
	I understand that the Sport Hall will be set up to adhere to social distancing guidelines and that I must adhere to this at all times throughout the camps.
	I understand that there are parts of the training require candidates to work in partners/teams and that I will follow the Coach instructions to maintain Covid-19 safe protocols during these periods.
	I understand that I will not be permitted to leave ACS Campus during the training day and that I must bring onto Campus all: food/drink that I require whilst on the camp.
	I understand that whilst in the Sports Centre I am only permitted access to designated areas allocated to the Camp.
	I understand that there are levels of risk of contracting Covid-19 by attending this Camp.

I agree to comply with all of the safety measures listed above and any further instruction provided by the Coach to keep me and other athletes safe during the course.

I understand that I may be asked to leave the course if I fail to fully comply with these safety measures and in such a scenario, I will not be eligible for any refund of camp fees.

Candidate Full Name:		Date:	
Candidate Signature:			

If the Candidate is under the age of 18yrs then this declaration must also be counter-signed by a Parent/Guardian.

Parent/Guardian Name		Date:	
Parent/Guardian Signature:			