



Oilfields Curling Club

Black Diamond, AB

Restriction Exemption Program Member Consent Form

By signing this consent, the individual is aware of the current Alberta public health orders which allow facilities implementing the Restriction Exemption Program to operate without certain restrictions. Oilfields Curling Club has made the decision to implement the program as of Monday, September 20th until further notice. Accordingly, until further notice, all members are required to provide proof of vaccination, OR proof of a negative Health Canada approved rapid antigen or PCR test with 72 hours of club access, OR documentation of a medical exemption as a condition of their participation in Club events. This applies to participants who are 18 years of age or older.

By signing this consent form:

1. I confirm my ability and willingness to provide proof of vaccination, negative COVID-19 test, or medical exemption upon request. I understand that the requirements may change with the publication of any new public health orders and that I will take appropriate measures to ensure my compliance with future orders.
2. I consent to a record of my verification status being kept on file until no longer required. I understand that the club will not be retaining a copy of my records, but will keep a record that they have been reviewed and deemed to be in compliance with the Restriction Exemption Program. I understand that I may be asked to produce additional documentation to ensure compliance with any further public health orders in the future.
3. I confirm that my proof of vaccination, negative test, or exemption provided is accurate and true.
4. I understand that I am subject to the Curling Club's disciplinary policy should I falsify my records. This may include termination of my membership without refund.
5. I understand that if I have only received the first dose of a two-dose vaccine that I will be asked to provide proof of full vaccination by October 25th.

Name (print)

Signature (18 and over)

Date: _____