APPENDIX B

ATHLETIC PARTICIPATION ACKNOWLEDGEMENT AND PLEDGE

All members of the School District of Philadelphia’s athletic teams have an important role to play in keeping other students, our teammates and the School District community safe by doing our part to stop the spread of COVID-19. Because of this, I pledge to take responsibility for my own health and help stop the spread of COVID-19.

- I will commit to wearing a mask and social distancing in situations where it is recommended outside of my sport.
- I will commit to any pre-screening procedures and self-assessment of my symptoms on a daily basis prior to participation.
- I will disclose any possible COVID-19 symptoms, such as fever, chills, rigors, new loss of smell or taste, cough, shortness of breath, difficulty breathing, congestion or runny nose, diarrhea, or nausea or vomiting.
- I will disclose possible exposure to someone with known or suspected COVID-19.
- I will encourage my teammates to practice these same healthy behaviors.
- I will not share towels, water bottles or other personal items.
- I will regularly wash my hands and use hand sanitizer before, during and after practices/games.
- I will avoid touching my face and, if I have to, use hand sanitizer afterwards.
- I understand COVID-19 is a highly contagious virus and it is possible to develop and contract COVID-19, 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 School District is following coronavirus guidelines issued by the CDC and other 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 also acknowledge that this pledge is a condition of my participation in athletics and that any failure to comply with my Pledge above may lead to discipline, including loss of privileges.
- I have read, understand, and agree to comply with my pledge above.

Student-athlete name:
____________________________________

Date: ______________

Student-athlete signature:
__________________________________________________________

Parent/guardian signature: _________________________________