

Belmont Complex

COVID-19 Facility Waiver

All patrons must complete this form to enter the facility.

I am aware of the CDC and Pennsylvania Department of Health Guidelines as it pertains to social distancing and the use of face coverings in public. I am in possession of a mask/face covering and (unless exempt for doing so) I will wear same while entering/leaving the facility, while moving about the facility and at any time that I am not practicing social distancing. I understand and acknowledge that my participation in this recreation activity might subject me to the risk associating with individuals who might be COVID-19 positive. As such, there is the risk that this activity could expose me to the COVID-19 virus. I undertake this activity with said knowledge and accept the risk associated therewith.

Signature: _____

Printed Name: _____

Phone #: _____

Date: _____