



**Marching Band Restart Training and Protocol Awareness
Acknowledgement**

| | | | |
|---------------|--|----------------------|--|
| Name | | | |
| School | | Training Date | |

| Initials | Item |
|-----------------|--|
| | I understand all participants must be screened daily. Only those cleared by screening will be allowed to participate. Any individual not meeting minimum criteria, including temperature check, must not be allowed to go beyond the screening area. |
| | I understand that no student will be permitted to participate until a parent and the student sign the release acknowledging risk and waiving liability. |
| | I understand that safe distancing of 6 feet must be maintained at all times, even during practices. |
| | I understand that individuals cannot share personal or band equipment. |
| | I understand the maximum number of individuals permitted at each venue is twenty-five (25) Outdoors and Ten (10) indoors. This includes everyone - students, band directors, managers, parent volunteers, etc. |
| | I understand students will be assigned to small groups (pods) of no more than ten (10). Once assigned, the student must remain in the same pod and must have no contact with individuals not in their pod. |
| | I understand all equipment must be thoroughly cleaned/sanitized between uses. |
| | I understand individuals must not be permitted to congregate before, during, or after practices. |
| | I understand restrooms must be sanitized between each practice session. |
| | I understand individuals cannot share water bottles. |
| | I understand physical contact increases the chance of transmission and must be avoided. (No handshakes, hugs, fist bumps, high fives, etc. can be permitted.) |
| | I understand that if I am not feeling well, have COVID-19 symptoms, have a fever, or have been around someone diagnosed with COVID-19, I should not attend or otherwise participate in practices. |
| | I understand students must not be permitted to enter school buildings during phase I except for restroom use, retrieval of band equipment, and/or medical emergency requiring access to the athletic training room. |
| | I understand that it's required that I wear a face covering at all times while participating and/or leading any band activity. |

By signing below, I acknowledge that I have been trained in protocols established by the NCHSAA and UCPS for the restart of high school marching band. Failure to follow these protocols may endanger students or other staff and can result in disciplinary action against me, up to and including dismissal.

Signature

Date