



Pettit Center Screening & Health Waiver

Effective June 1, 2020

Note to all skaters and coaches:

This must be completed and signed, and on file with user group or Pettit Center office in advance of admittance by individual into the Pettit Center for skating or training. Those individuals who have not complied with this requirement will not be permitted to enter the Center.

Today's Date: _____

Name (please print): _____

User Group: _____

1. An inherent risk of exposure to COVID-19 exists in any public place where people are present. COVID-19 is an extremely contagious disease that can lead to severe illness and death. The Pettit Center has established enhanced health and safety measures for its staff and users, consistent with the criteria and mandates from the City of Milwaukee Health Department and the County of Milwaukee, effective June 4, 2020. All persons in the building are required to follow all instructions provided to user groups in advance and posted in the Center.

Understood and agreed: YES ___ Initials: _____

2. All participants, including skaters and coaches, in scheduled ice or off-ice sessions do so at his/her own risk in terms of contracting COVID-19.

Understood and agreed: YES ___ Initials: _____

3. Have you been diagnosed with or come into close contact with someone who has a suspected or confirmed COVID-19 diagnosis in the past 14 days?

YES _____ NO _____ Initials: _____

4. In the last 14 days have you had a fever (greater than 100.4 degrees F) OR experienced any of the following COVID-19 symptoms: cough; shortness of breath or difficulty breathing; chills; muscle pain; sore throat; or new loss of taste or smell?

YES _____ NO _____ Initials: _____

5. Are you currently experiencing a fever (greater than 100.4 degrees F) OR any of the following COVID-19 symptoms: cough; shortness of breath or difficulty breathing; chills; muscle pain; sore throat; or new loss of taste or smell?

YES _____ NO _____ Initials: _____

If answer to 3, 4, or 5 is Yes, the individual is NOT permitted to enter the Center for between 3 and 14 days, subject to symptoms being completely resolved and written release from doctor.

SIGNATURE: _____

DATE: _____

Gold Medal Excellence, Community Well-Being

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