**Mukwonago Wrestling Club Safety Plan/Agreement
 2020-2021**

**Parents/guardians** of any participant in the Mukwonago Wrestling Club program will be required to agree to the following in order to participate:

1. **Check your child's temperature at home and thoroughly wash their Hands**, before attending each practice.  **If their temperature is above 100.4 they are NOT to attend**.
2. Ensure if their child has had \*symptoms (see below) do not return to practice until:
	1. They are free of fever (less than 100.4) AND respiratory symptoms for at least 3 days (72 hours) without the use of fever reducing medicine AND 10 days have passed.
	2. If they have had these symptoms, they may be required to have a written medical clearance to return to classes/practices.
3. Sign in (attendance) upon arrival in the Athletic foyer.  **Please only one adult per child (with a mask)-no extra siblings please.**
4. **No Parents in wrestling room during practice.**
5. Ensure that each wrestler has a mask to wear to practice, entering and leaving the building (possible modifications if there is a risk involved when wearing it).
6. Supply their wrestler(s) with their own water bottle.  NOT to be shared.
7. Encourage their child to bring their own hand sanitizer-some will be on premises.
8. Participants should come in their practice gear and not congregate in the bathroom/locker/stairwell area/room to change. Wrestling Shoes should be put on before going up the stairs.

**Coaches** will also adhere to the above guidelines as well as work to maintain social distancing within their own group and from other groups where possible and reasonable for their safety.

1. Coaches will be supplied with sanitizer for use between each station/rotation for the students use for their hands and feet, if the wrestler does not have their own.
2. Mats will be wiped down between sessions.
3. Coaches will warm up/stretch their own group in their designated area, no big group warm up.
4. Maintain social distancing when possible.

**General Safety Precautions**:

1. We will attempt to use drills that can be done alone without the use of a partner, if able..
2. Maintain the same partner if the drills/conditioning that cannot be done solo.
3. Leave gym bags spread out the room so as to not have wrestlers gathering in one location.
4. Parents/guardians are required to wear masks at all times.

**\*Stay home if you have one of these symptoms:**

|  |  |
| --- | --- |
| * Cough (new or worsening)
 | * Nausea
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| * Temperature =>100.4 (oral/tympanic (ear)/temporal (forehead) or 99 axillary)
 | * Muscle pain/aches (not from working out)
* New loss of taste or smell
 |
| * Diarrhea
 | * Shivering
 |
| * Vomiting
 | * Sore throat
 |
| * Chills
 | * Runny nose/congestion
 |
| * Headache
 | * Unusual fatigue
 |

I will not hold Mukwonago Wrestling Club or Mukwonago Area Schools liable if my child is exposed to Covid 19/other communicable diseases on their premises. I have read, understand and agree to this safety plan as stated above.

Parent Signature:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone #:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Age:  \_\_\_\_\_\_\_  Grade:  \_\_\_\_\_\_
Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_