





Fall 2020 (Outdoor)

WHO: Adults, Ages 18 and over-Co-ed

WHAT: Enjoy PICKLEBALL games with your neighbors.

Wear Comfortable Clothing and Sneakers. Bring H20 & Paddles. You must supply your own paddle. Join Anytime, but you MUST BE registered in order to participate. No Drop-Ins!

Please see attached safety protocols to help keep the program safe for everyone to enjoy!

Montville Community Park Pickleball Courts, 130 Change Bridge Road in Montville. **WHERE:** 

WHEN:

SESSION	DAY/S	<u>DATES</u>	TIMES	RESIDENT COST	NON-RESIDENT COST
1	Wednesdays Only	Sept 23rd thru December *Weather Permitting	6:00pm to 9:30pm	\$30.00	\$45.00
2	Fridays Only	Oct 2nd thru December *Weather Permitting	6:00pm to 9:30pm	\$30.00	\$45.00
3	Wednesdays AND Fridays	Sept 23rd to Dec (No: 9/25) *Weather Permitting	6:00pm to 9:30pm	\$50.00	\$75.00

<sup>\*</sup> Make-Up dates and times will be added on when available due to inclement weather.

you with program changes and/or conflicts!!! \*\*\* Cell phone number MUST BE provided! \*\*\*

COORDINATORS: Tim Braden & Dawn Kirschner

See chart above. **NOTE**: There are no refunds for this program. FEE:

**PAYABLE TO:** Montville Recreation (located at 195 Change Bridge Road in Montville)

### **REGISTRATION PROCEDURES:**

1. On-Line from Home (Echeck with 1% Fee OR Credit Card with 3% Fee)

**OR** 2. Payment Drop Box in Municipal Building's Parking Lot (Check Only...must have family page set up on Community Pass)

For On-Line Registration !!! Go to the town's website at: http://www.montvillenj.org/RecRegistration To Download Registration Forms go to: http://www.montvillenj.org/RecFlyers

QUESTIONS ??? Call Recreation: (973) 331-3305 OR Visit our Website: www.montvillenj.org



Participant Signature \_

LIKE us on FACEBOOK at: https://www.facebook.com/Montvillerec/



Date\_

\*\*NOTE: You can register directly from home! No need to fill out paperwork! \_\_ D/O/B \_ Participant Name Age \_\_\_\_\_Town \_\_\_\_\_ Address Zip Code Cell Phone # (For Communication Purposes) E-Mail/s (Please print clearly! Distinguish b/w letters & numbers!) Emergency Name/Relation/Phone # Known Medical Conditions/Allergies 1—Wednesdays 2-Fridays 3-Wednesdays & Fridays <u>Please Circle Session Choice</u>: Please list any special needs that you may have that will assist us in providing a successful experience: I understand that the Recreation Department DOES NOT provide accident insurance. I have read and agreed to all Covid 19 Protocols and signed Waiver of Liability relating to.

FOR OFFICE USE (9/17/20): Fee	e Paid Cash	Check	Received By	Date	PROGRAM # 895
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# Waiver of Liability Relating to Coronavirus/COVID-19 for Participant

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. It is reported to be extremely contagious, with no known treatments, cure or vaccine. COVID-19 is believed to spread mainly from person-to-person contact, however the exact methods of spread and contractions are still unknown.

People reportedly can be infected and show no symptoms and therefore spread the disease. Evidence has shown that COVID-19 can cause serious and potentially life threatening illness and even death.

Montville Township Recreation has put in place preventative measures that abide by the New Jersey State Department of Health Guidelines to reduce the spread of COVID-19; however Montville Township Recreation cannot prevent you or your child/ren from becoming exposed to, contracting, or spreading COVID-19 while participating in recreation sponsored programs or events. It is not possible to prevent against the presence of the disease. Therefore, if you choose to participate in any programs or events you may be exposing yourself to and/or increasing your risk of contracting or spreading COVID-19.

ASSUMPTION OF RISK: I have read and understood the above warning concerning COVID-19. I hereby choose to accept the risk of contracting COVID-19 for myself in order to participate in a recreation sponsored program or event. These services are of such value to me that I accept the risk of being exposed to, contracting, and/or spreading COVID-19 in order to participate in programs or events sponsored by the Montville Township Recreation Department.

WAIVER OF LAWSUIT/LIABILITY: I hereby forever release and waive my rights to bring suit against the Township of Montville, its departments, agencies, boards, commissions, officers, officials, agents, servants, administrators, and employees, or other representatives in connection with exposure, infection, and/or spread of COVID-19 related to (as a result of participating in a recreation sponsored program/event).

I understand that this waiver means I give up my rights to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

CHOICE OF LAW: I understand and agree that the law of the State of New Jersey will apply to this contract. I acknowledge that I will do a daily temperature check and will not attend a program if a fever of 100.4 or higher is present. I also acknowledge that I will not attend a program should anyone in the family (household) has any knowledge of testing positive for COVID-19 in the last 14 days, being in contact with someone who has tested positive for COVID-19 in the last 14 days and that myself nor anyone in my household is presenting any of the following symptoms of COVID-19 listed here: Fever, Shortness of Breath, Loss of Sense of Taste or Smell, Dry Cough, Runny Nose, Sore Throat, or Rash. I acknowledge that if I have visited any states listed under the Governors 14-day quarantine travel advisory in the past 14 days, we will not attend a program until I've quarantined 14 full days from the date we left the state on the quarantine list.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE.

Participant Signature (If over 18 yrs)	
Participant Signature Lit over 18 vrs)	Date

The following precautions, protocols and policies are constantly amended based upon updated guidance from the CDC and state Health Departments. This information represents our policies as of 9/16/20.

BEFORE REGISTERING YOU AND/OR YOUR CHILD FOR A PROGRAM PLEASE CAREFULLY READ ALL OF THE PROTOCOLS & REQUIREMENTS LISTED BELOW.

Each of the Recreation Department's programs will be conducted outdoors and have been designed to keep participants socially distanced in small groups and abide by and enforce the New Jersey Department of Health and the CDC COVID-19 safety guidelines.

Masks will be required at all times where social distancing cannot be done, except during physical/program activity. Before registering you and/or your child for any programs, please consider if the social distancing requirements will be a hardship for you and/or your child to abide by. Anyone who cannot abide by the social distancing requirements will be asked to wear a mask. If they you and/or your child abide by these guidelines, you and/or your child will NOT be permitted to are unable to keep on a mask, they will not be permitted to continue in the program.

Coronavirus Procedures, Protocols and Required Documents: You and/or Your Child's safety and health is always our number one priority. Attending a Recreation sponsored program is a personal choice in a very uncertain time. By following the recommendations of the New Jersey State Dept. of Health and the CDC, we are working to keep risk as low as possible.

**Covid-19 Waiver** – Must be completed by all staff and parents/guardians of participants and/or staff under the age of 18. You will be signing off on this Waiver Electronically during the registration process. If you register via mail, you will need to sign a physical copy and return to us before participation in any program.

Temperature and Health Screenings: To participate Eevery instructor/coach/staff member and class participant will be required to confirm that he/she/they have taken their temperature prior to the class and it was belowand must have registered less than 100.4 degrees. In aAdditionally, they will confirm that no one in the family (household) has any knowledge of testing positive for COVID-19 in the last 14 days, being in contact with someone who has tested positive for COVID-19 in the last 14 days and that no anyone in the household is presenting any of the following symptoms of COVID-19 listed here: Fever, Shortness of Breath, Loss of Sense of Taste or Smell, Dry Cough, Runny Nose, Sore Throat, or Rash. Also, they will confirm that no one in the household has visited any states listed under the Governors 14-day quarantine travel advisory in the past 14 days.

Anyone showing symptoms or sharing a residence with others who currently have symptoms **should not come to class** and should follow the importance of staying home when experiencing symptoms of COVID-19 or residing with someone experiencing symptoms of COVID-19. https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/community-based.html

If a participant/Instructor/Coach/Staff member has any symptoms – Recommended guidance for community-related exposure, when a class participant or staff member presents symptoms of COVID-19 and when they can return to their activity are based on the CDC guidance for community-related exposure. https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html

PPE/Masks for Staff/Instructor/Coach and Participants – Masks will be required by all during check-in and check-out<u>all upon arrival and departure</u> of the program. Participants will not be required to wear masks when attending programs unless they are incapable of keeping socially distanced from others and during physical activity.s.

Sanitizing Measures- Hand Sanitizer will be available to all participants. Public bathrooms remain closed, Port-a-Johns are available at all recreational sites, but participants are highly encouraged to go before attending a program. Equipment will be wiped down in between use. WATER FOUNTAINS ARE CLOSED!!! PLEASE MAKE SURE TO BRING WATER BOTTLE!

**Signage** - Poster and signage from the Centers for Disease Control and Prevention (CDC), and/or other accredited health agencies will be posted in appropriate places where intended audiences can be reached. Examples include: COVID-19 information; Handwashing; Cough etiquette; Symptoms associated with COVID-19; Stop the spread of germs; Physical distancing.

**Non-participants/Spectators** - Remember to wear a facemask whenever 6 feet social distancing standards with non-family members cannot be met.

## FAQ's and NEED TO KNOW:

### How will Montville Township Recreation proceed with programming moving forward?

We will be following guidelines as recommended by the CDC and the Government in order to run programs in a safe and secure manner. We will take every care to ensure the safety of participants, guardians and staff/instructors/coaches. We will be adapting all programs to meet protocol and will redesign curriculums to ensure that you and/or your child/ren can safely participate.

What are the sign-in/Sign-out procedures?

Please make sure to wear face masks when walking around in public areas and checking in and out of programs and be sure to maintain social distancing.

Can I stay?

Yes, but, remember to wear a facemask and sit 6-feet apart when not with immediate family members.

What if a bathroom break is needed?

Public bathrooms remain closed. Port-a-Johns are available but we strongly recommend going to the bathroom at home prior to the program.

COVID-19 PROCEDURE/GUIDELINE REMINDERS Do not register for classes if you are not comfortable with the guidelines set forth by the NJ DOH, CDC or Recreation Department's protocols and procedures for programming at this time. **Do not come to class** if you or any member of your household are not feeling well or have been exposed to a person with COVID-19. **Do not come to class if** you or any member of your household have been exposed to a person with COVID-19 within the past 14 days.