



Halifax County Schools
2021-2022
COVID-19 IN SPORTS Information

What is COVID-19?

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. The COVID-19 virus is extremely contagious and is believed to spread mainly from person-to-person contact. The spread of COVID-19 can be contained through the use of mitigation strategies as well as COVID-19 vaccinations.

What are the Signs and Symptoms of COVID-19?

Signs and Symptoms	Risk Factors
<ul style="list-style-type: none">▪ Fever (100.4°F/38°C or higher)▪ Cough▪ Shortness of breath▪ Gasping for air▪ Cannot talk without catching breath▪ Persistent pain or pressure in chest▪ Confused or inability to arouse▪ Bluish lips or face▪ Sore throat▪ Nausea or vomiting▪ Diarrhea▪ Loss Taste/Smell	<ul style="list-style-type: none">▪ Chronic lung disease▪ Moderate to severe asthma▪ Serious heart conditions▪ Immunocompromised▪ Bone marrow/organ transplantation▪ Immune deficiencies▪ Poorly controlled HIV/AIDS▪ Prolonged use of corticosteroids/ immune weakening medications▪ Severe obesity▪ Diabetes▪ Chronic kidney disease▪ Liver disease

Anyone currently experiencing signs or symptoms of COVID-19, or fall under any risk factor considerations, should consult a doctor for approval of participation in athletics.

How can you protect yourself and your child from COVID-19?

- ✓ Get Vaccinated - COVID-19 vaccines are safe and effective at protecting you from getting sick. In general, people are considered fully vaccinated, 2 weeks after their second dose in a 2-dose series, or 2 weeks after a single dose vaccine, such as Johnson & Johnson's vaccine. Everyone 12 years of age and older is able to get a COVID-19 vaccination.
- ✓ Wear a mask if unvaccinated, or in areas where masks are required ☐ Stay home if you are sick and minimize contact with those who are sick.
- ✓ Practice good personal hygiene - frequent handwashing, avoid touching your face, cover your mouth when coughing/sneezing.

What Should you do if you Think your Child is exhibiting signs or symptoms of COVID-19?

If you have a fever, cough, or other symptoms of COVID-19, or have come in contact with someone who has COVID 19, you might have COVID-19.

- ✓ Stay home if you are sick, or if someone in your household is sick
- ✓ Contact your healthcare provider – Your healthcare provider can perform diagnostic tests to determine if you have COVID-19

Notify your coach, school nurse and athletic director of any potential illness, COVID-19 diagnosis, or Close Contact with a COVID-19 positive individual.

Brief Overview of the Halifax County Schools COVID-19 Policy

Halifax County Schools has put in place preventative measures to reduce the spread of COVID-19 and ensure that those who are diagnosed with COVID-19 can safely return to activity:

- ✓ All athletes, coaches, and athletic staff are required to self-screen and monitor their health daily. Anyone exhibiting signs/symptoms of COVID-19, or has come in close contact with someone who has COVID-19, will not be cleared to report to campus until released by their Primary Care Physician.
- ✓ Those infected with COVID-19 must have the *Return To Play Form: Covid-19 Infection Medical Clearance Releasing The Student-Athlete To Resume Participation In Athletics* completed by their doctor and parent/guardian and be cleared by their School Nurse prior to returning to participation
- ✓ Halifax County Schools will continue to monitor the on-going COVID-19 pandemic and will comply with all local, state and federal requirements and Center for Disease Control (CDC) recommendations as it pertains to containing the COVID-19 virus.

While these prevention strategies are in place for everyone's safety, Halifax County Schools cannot guarantee that your child, or you, will not become infected with COVID-19. Further, participating in athletics could increase your child's risk and your risk of contracting COVID-19. Sports may vary for increasing risks of infections based on level of close contact required.

Vaccination Status:

Has your child been vaccinated against COVID-19? (Please Select) Yes No

If Yes:

Vaccine Manufacturer (Please Check) Moderna Pfizer Johnson & Johnson Other: _____

Date of 1st Dose: _____ **Date of 2nd Dose:** _____

If No:

I understand that being unvaccinated may put my child at an increased risk of contracting COVID-19 while participating in athletics and agree to notify the coach, school nurse and athletic director of any change to his/her vaccination status. **Initials** _____

By signing this document, I acknowledge that I the information provided above is true and that I have reviewed the signs and symptoms of COVID-19, agree to report any COVID-19 diagnosis or contact, and agree to follow the HCS COVID-19 Policy.

Print Name: Parent/Guardian

Signature: Parent/Guardian

Date

Print Name: Athlete

Signature: Athlete

Date

All information provided is in reference and accordance with the World Health Organization (WHO), Centers for Disease Control and Prevention (CDC), and the Halifax County Health Department.