



## Appendix K

### SA RUGBY AMATEUR RUGBY RETURN TO PLAY CONSENT, INDEMNITY & UNDERTAKING FORM FOR PERSONS OVER THE AGE OF 60 YEARS OLD

I knowingly and willingly consent to attend RUGBY training and matches as permitted under the current Alert Level 1 Regulations at ..... (Association/Club/Academy/Team)

- I confirm that I have the required written permission from my treating medical doctor who confirms that I am at no further increased risk from attending and participating in the club training and match environment.
- I understand the COVID-19 virus has a long incubation period during which carriers of the virus may not show symptoms and still be highly contagious.
- I understand that due to the frequency of visits of other players, the characteristics of the virus, and the characteristics of rugby activities, I have an elevated risk of contracting the virus simply by being at a rugby training and match venue.
- High risk people include persons over the age of 60, persons who have pre-existing medical conditions such as: asthma, chronic lung conditions, hypertension, autoimmune disease, organ transplants, cancer, immunocompromised, obesity (BMI over 40) and liver or kidney disease conditions. I confirm that I do not fall into any of these high-risk categories.
- I acknowledge that if I been diagnosed with COVID-19 or suspected of having COVID-19, a letter from a medical doctor confirming that I am fit to return to train and play and A negative Rt-PCR test must be submitted to the Compliance Officer of the (Association/Club/Academy/Team) prior to being permitted back to training.
- I understand that should I have or develop a pre-existing condition which increases my risk, or if I have been in contact, or in future come into contact, with a person who has been diagnosed with COVID-19, that I need to declare this to the Compliance Officer of the (Association/Club/Academy/Team) before I present myself at any training or match venue. I acknowledge that the Compliance Officer is entitled to require that I self-isolate for a period and/or that I do not participate in any or all rugby activities at the (Association/Club/Academy/Team)
- I am aware of the risks involved with the spread of COVID-19 and the risks it may hold to my health and the health of others I come in contact with.
- I shall comply with the “SA Rugby Amateur Rugby Return To Train and Play Guidelines”, including the Government Gazettes of 6 July; 28 August and 7 October 2020 (where applicable) at all times.
- I accept all of the above risks and conditions and indemnify and hold SARU, Provincial Unions, Amateur / Community Clubs affiliated to Provincial Unions and all Associations affiliated to SA Rugby and their staff including the Compliance Officer harmless against any loss, cost, claim or liability arising as a result of a failure by the to comply with the Association/Club/Academy/Team to comply with the conditions herein.



- I accept all of the above risks and conditions and hereby indemnify and hold the South African Rugby Union, Provincial Unions, Amateur / Community Clubs affiliated to Provincial Unions and All Associations affiliated to SA Rugby and their staff including the Compliance Officer blameless should I contract the disease at any rugby training or match venue.

I undertake that I will abide by all the regulations and rules for participation in rugby as laid out in the **“SA Rugby Amateur Rugby Return To Train and Play Guidelines”**, including the Government Gazettes of 6 July; 28 August and 7 October 2020 (where applicable), a copy of which I have received and read.

I have read and understood the terms of this consent, indemnity and undertaking as laid out and confirm I will comply therewith in full.

**Name & Surname:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_