



MI Safer Sports COVID-19 Testing Program: Participant Code of Conduct

The Michigan Department of Health and Human Services, in partnership with Michigan's schools, is pleased to provide COVID-19 rapid antigen tests for school sanctioned athletics.

Where it would be unsafe for participants to remain masked, all participants in those winter contact sports must be tested consistent with MDHHS Guidance for Athletics issued February 7, 2021.

As a participant in the MI Safer Sports program, I understand and agree to the following:

- My participation in the practices and competitions over the course of this program is voluntary.
- I will receive a COVID-19 test (rapid test) in the 24 hours preceding any unmasked practice or competition and must receive negative test results in order to practice or compete.
 - If I test positive, I cannot return to practice or compete unless I receive a negative molecular (PCR) test within 48 hours of the rapid test results and I continue to have no symptoms.
- If I exhibit any symptoms of COVID-19, I will self-isolate and not attend practice or competition, regardless of any negative test result.
- If I test positive for COVID-19, show symptoms, or am exposed in close contact to someone who tests positive, I will cooperate with local and state public health officials in the case investigation and contact tracing process.
- Inside and outside of practice and competition, I will follow all state and local health orders that apply in my area, including wearing a face mask when around others, limitations on gatherings outside my immediate household, including non-team gatherings and social gatherings with my team outside of practice or competition.

I understand that failure to follow the above agreements could result in my removal from competition and practices and may result in disqualification of my entire team.

MDHHS may request documentation at any time necessary to enforce this Code of Conduct.

Participant Signature & Date

Parent/Guardian Signature & Date if Participant is a Minor

Please Circle Where Your Child Plans To Be Testing Weekly:

- 1) Through School System**
- 2) Through SWM**