

Lymph Therapies SARS_COV2 (COVID-19) Student Agreement

As a student of Lymph Therapies, I agree to comply with the following restrictions when they are required by local legislation or Ministry of Health orders.

1. Entry to the classroom and refreshment breaks

1.1. I agree to install and use the government tracing app or complete paper forms as required by the venue.

1.2. I agree to abide by all local legislation and Ministry of Health directives in place, including but not limited to

1.3.1. Maintain physical distancing, mask wearing and visor if required.

1.3.2. Provide evidence of a negative COVID-19 test if required.

1.3.3. Provide evidence of my vaccine status as required by the venue

1.3.4. Notify my Instructor immediately if I have experienced any of the following symptoms during the previous 14 days, and if I begin to experience any of them, leave the classroom immediately

1.3.4.1. fever (37.5 ° or higher)

1.3.4.2. cough

1.3.4.3. sore throat

1.3.4.4. shortness of breath (difficulty breathing)

1.3.4.5. runny nose

1.3.4.6. loss of taste

1.3.4.7. loss of smell

1.3. I agree to bring my own

1.4.1. Hand sanitiser

1.4.2. Water bottle

1.4.3. Linens as directed by the Course Organiser

1.4.4. Massage table if requested by the Course Organiser

1.4. I agree to practice frequent hand washing and sanitising on entering and during all classes.

1.5. I agree to follow all other restrictions and local government health directives in place at the time of the course. initial this page.....



2. Practical sessions

2.1. I understand that it is not possible to maintain physical distancing during the practice sessions and agree to minimise the risk to myself and others as follows;

2.1.1. I agree to wear an appropriate face mask and visor if required by local government health directives and refrain as much as practically possible from touching my face (or mask).

2.1.2. I agree not to share my body coverings with others and acknowledge that I am responsible for their cleanliness and suitability for use.

2.2. I agree to disinfect the table surface after each practical session.

2.3. I agree to wash my hands with soap and water after sneezing or coughing.

Signature Date

Please print your full name

