

# WESTERN ONTARIO ATHLETIC ASSOCIATION SENIOR HOCKEY LEAGUE RETURN TO PLAY POLICY 2021/2022 Season

This Return To Play Policy will be enforced to promote the return of hockey programming for the entire 2021-2022 season with the focus on safety for our W.O.A.A. Senior Hockey League Members.

It is the responsibility of team management to confirm with your facilities, municipalities and regional Public Health Units to ensure compliance with any additional protocols or restrictions that may be in place at the local level; to include but not limited to:

- contact tracing at the door
- screening (if applicable in your PHU)
- mandatory wearing of face covering
- · cleaning and sanitizing
- social distancing (6 feet)
- following Public Health Unit (PHU) and local facility directives

# **VACCINATIONS:**

The WESTERN ONTARIO ATHLETIC ASSOCIATION (W.O.A.A.) will require that all W.O.A.A. Senior Hockey League Members be double-vaccinated against COVID-19 prior to the commencement of team activities associated with the beginning of the 2021/2022 season.

The policy applies to all players, coaches, trainers, team and league staff, game officials, executives and volunteers.

The policy is fully intended to protect the health and safety of ALL W.O.A.A. Senior Hockey League players and members and to protect against the potential transmission of the virus.

The W.O.A.A. Senior Hockey League will comply with the Ontario Human Rights Code (OHRC) and local Public Health Units (PHU) to offer support to any league member who is unable to be vaccinated for substantiated medical reasons and/or on grounds protected under the OHRC. The league will collectively work together with independent medical and legal advisors appointed by the league Senior Hockey Chairman to assist with all issues.

For further information on this Policy, please email or call:

W.O.A.A. Senior Hockey Chairman Allan Dickson 519-357-8571 (C) jallandickson@hotmail.com

#### 1. Vaccination Policy

**Definitions:** 

"Accepted COVID-19 vaccine" means a COVID-19 vaccine that has been approved for use by Health Canada.

"Members" means Players, Team Staff, Game Officials, Off-ice Officials, Officials, Executives, Volunteers, and League Staff

"Fully Vaccinated" means having received the completed series of an Accepted COVID-19 Vaccine. An individual is considered Fully Vaccinated 14 days after receiving their completed dose.

"LEAGUE" means the W.O.A.A. Senior Hockey League.

## <u>LEAGUE VACCINATION POLICY – 2021/2022 Season</u>

The LEAGUE ("LEAGUE") requires that all LEAGUE Members be Fully Vaccinated against COVID-19, in accordance with the remainder of this Policy at least 14 days prior to the commencement of the 2021/2022 season.

This Policy applies to all LEAGUE Members, including individuals who attend training camp, practices, games or play in the LEAGUE, and specifically includes all players, coaches, trainers, team and league staff, officials, Executives and volunteers.

This Policy is effective immediately, with due regard for the availability of the Accepted COVID-19 vaccine.

#### 2. Reason for Policy

The health and safety of all LEAGUE Members is the top priority of the LEAGUE. Therefore, the purpose of this Policy is to protect the health and safety of all LEAGUE Members by reducing the risk of exposure to and transmission of COVID-19, an infectious communicable disease, among all persons involved in the LEAGUE; and to promote the health and safety of all members of the LEAGUE community, through vaccinations against COVID-19.

This Policy is necessary to prevent, respond to, and alleviate the outbreak of COVID-19 in the LEAGUE because of the significant risk factors for COVID-19 infection present while participating in an organized hockey league as a player and non-player, both on and off the ice. These risk factors include close contact in predominantly indoor closed-space environments (i.e. arenas, dressing rooms, buses and hotels etc.).

The close contact nature of organized hockey makes compliance with social distancing impossible. In addition, it reduces the effectiveness of other infectious disease transmission protocols such as masking.

#### 3. Vaccination Requirement and Records

All LEAGUE Members are required to be Fully Vaccinated against COVID-19 and must present evidence satisfactory to Team Management demonstrating that they received the necessary doses of an Accepted COVID-19 vaccine. At least two (2) weeks prior to the start of training camp, or the date on which the LEAGUE Member shall begin engaging in hockey or providing services to the LEAGUE. Such evidence shall be provided in advance of attending any LEAGUE event.

LEAGUE Clubs are required to confirm to the league office receipt of evidence satisfactory to the LEAGUE that all team Members are Fully Double Vaccinated. The LEAGUE reserves the right to request evidence satisfactory to the LEAGUE for any LEAGUE member, and the Club must provide such evidence within 24 hours of the League's request.

The LEAGUE will be responsible for the collection of evidence satisfactory to the LEAGUE for all on-ice officials assigned to LEAGUE games.

Subject to the below, where a LEAGUE Member has not been vaccinated and/or has not provided evidence satisfactory to the LEAGUE demonstrating that they received two doses of an Approved COVID-19 vaccine in accordance with the timelines above, the LEAGUE may:

In the case of a team or league employee, place the LEAGUE Member on an unpaid leave of absence for the duration of the pandemic or until such time that COVID-19 no longer poses a significant public health risk;

In the case of a player, remove the player from the team roster for the duration of the pandemic or until such time that COVID-19 no longer poses a significant public health risk;

In the case of an Executive Member/Volunteer, require the Executive Member/Volunteer to cease involvement with the LEAGUE for the duration of the pandemic or until such time that COVID- 19 no longer poses a significant public health risk.

LEAGUE Members who are not Fully Immunized (i.e. who have only received a first dose of the COVID-19 vaccine) must provide a negative COVID-19 PCR test and confirmed dated of second dose appointment to the Club before entering the team environment and provide a negative COVID-19 PCR test every 8 days until confirmation of their second dose.

## **4. Acceptable Vaccines**

The LEAGUE recognizes all vaccines approved by either Health Canada or by the World Health Organization. All LEAGUE Members will be required to confirm they are vaccinated regardless of which approved vaccine they receive.

## **5. Acceptable Documentation**

Acceptable documents serving as evidence of COVID-19 immunization include:

- A digital or physical Dose Administration Receipt
- Medical records signed by a licensed health care provider indicating vaccine name and date(s) of administration

LEAGUE Members can find COVID-19 vaccine verification at - <a href="https://covid19.ontariohealth.ca/">https://covid19.ontariohealth.ca/</a>

# **6. Reporting and Record Keeping**

All records about the Accepted COVID-19 vaccine will only be collected, used, or disclosed as necessary for legitimate operational purposes or as directed or requested by governmental authorities.

All records will be kept in a secure manner consistent with the W.O.A.A. LEAGUE Policies and Privacy Act.

#### LEAGUE COVID-19 VACCINATION EXEMPTION FORM

I, am request that I be awarded exemption from the LE vaccinated.	a W.O.A.A. Senior Hockey LEAGUE Member and EAGUE Vaccination Policy to be fully COVID-19	
I request that I be exempt from the requirement to receive the above vaccinations based on:		
[ ] Medical grounds		
[ ] Religious grounds. I hereby certify that the receipt of a vaccine or immunization would conflict with or violate my sincere religious beliefs.		
Name of Church or religion you are a member		
Name of charen of rengion you are a member		
Printed name of Religious Leader	Signature of Religious Leader	
[ ] Ontario Human Rights Code/Other		
Please explain:		

<sup>\*</sup> All medical exemptions must be verified with a letter from the W.O.A.A. Senior Hockey LEAGUE Member's Family Doctor, attending physician, or qualified medical practitioner. It must specify which vaccine(s) cannot be given and certify that the Family Doctor, attending physician, or qualified medical practitioner has personally examined the W.O.A.A. Senior Hockey LEAGUE Member and is of the opinion that the W.O.A.A. Senior Hockey LEAGUE Member's health would be endangered by the immunization.

I understand and agree if granted accommodations from the LEAGUE Vaccination Policy that I, at my own expense, may be required to do any or all of the following: produce a negative PCR COVID 19 Test taken before the W.O.A.A. Senior Hockey LEAGUE Member may enter the team environment,

- a) produce a negative PCR COVID-19 Test twice a week during the season to be submitted to the team management, (SUBMISSION 2 DAYS PRIOR TO SCHEDULED EVENT),
- b) wear a face covering or non-medical mask at all times including all team on and off-ice activities,
- c) provide their own transportation to and from all team activities and are not permitted to travel on any team transportation, i.e. team bus,
- d) provide their own accommodations on all team out of town games at their own expense,
- e) must remain physically distant from others in the club facility, and
- f) must self-quarantine for 14 days after High-Risk exposure to COVID-19

Date of Birth (MM/DD/YYYY)
Date (MM/DD/YYYY)
W.O.A.A. Senior Hockey League Member's League
W.O.A.A. Senior Hockey League Member's Signature

W.O.A.A. Senior Hockey Chairman will forward this form to the appropriate third-party advisor for determination on approval of exemption.

Please submit completed form to Allan Dickson, W.O.A.A. Senior Hockey Chairman

jallandickson@hotmail.com

# LEAGUE COVID-19 VACCINATION MEDICAL EXEMPTION REQUEST FORM

I, Dr	, a duly registered physician in the Province of
	_, hereby attest to have reviewed the information below. Despite
this information, it is my medical opin	nion that my patient,, who I
COVID-19 vaccines (Pfizer-BioNTech,	er health risk in receiving any/all of the Health Canada-approved Moderna, Astra-Zeneca, Janssen (Johnson and Johnson)) than if nt of SARS-CoV-2, the virus responsible for causing COVID-19 during
to my regulatory body is brought forv	es. Furthermore, I am prepared to defend my decision if a complain ward against me by any other person participating in LEAGUE n subsequently infected by my patient.
strongly recommend that every person receive a complete dosing regimen of	h impairment and death, Health Canada and the CDC in the U.S. on of every ethnicity and every state of mental and physical health f COVID-19 vaccination. This includes individuals who are frail, illness, immunocompromised and receiving chemotherapy.
pregnant people and breastfeeding m	d Gynaecologists of Canada most recently stated that given that nothers are at increased risk of morbidity from COVID-19 infection, /ID-19 vaccination at any time during pregnancy or while exist.
The rationale for my decision to author	orize this medical exemption is:
·	ergic reaction to PEG (polyethylene glycol).
3) Known severe alle	ergic reaction to polysorbate 80. ergic reaction to a previous dose of COVID-19 vaccination.
4) Known current SA	ARS-CoV-2 infection and is self-isolating.
	accepted protocol to manage allergic reactions to the components 3) has been checked off, please provide the name and contact info
(Sign)	(Date)
(Print)	<del></del>
Registration/license #	
Province	