



BELOIT YOUTH HOCKEY ASSOCIATION, Inc.

P.O. Box 1262

Beloit, Wisconsin 53512-1262

A501 (c3) Organization / ES9569

Beloit Youth Hockey Association Covid 19 Rink Operation Plan Proposal

Current Phase: 2

This plan is formulated to meet the guidelines set forth by the City of Beloit located in the County of Rock in the State of Wisconsin. The current Phase of the three Phase reopening plan is Phase two. All the information contained herein is based on Phase Two guidelines set forth by our Governing bodies for our geographical area. The Beloit Youth Hockey Association in conjunction with the City of Beloit will execute and enforce this policy to the membership and public as it pertains to BYHA. This is a zero-tolerance policy and failure to comply will result in legal ramifications and or expulsion from BYHA. Please read and understand the categories below as to how we will operate in the present phase.

Rink Layout and Operation:

1. Locker rooms will be unavailable, including shower facilities. Players must show up almost entirely dressed and will finish dressing in the assigned area in the folding chairs on the rubber mats located at the East end of the rink. It is advised that the youngest players show up entirely dressed with skate guards on to enter and exit the rink. This is to prevent a large gathering of parents and children prior to the scheduled practice.
2. Water fountains will be closed. Players must bring their own water bottles that are clearly marked without sharing with other players. Coaches may **NOT** provide a team bottle or bottles at this time.
3. One-way traffic to enter and leave the premises. Please follow signage to enter and exit the rink. The players will enter through the front entrance doors on the left and will exit through the doors on the right. Upon entering the rink, everyone will have their temperature checked. Those at or exceeding 100.4 degrees fahrenheit will be denied entry into the rink.
4. **ALL** persons entering the rink will be required to wear a mask. No exceptions! Players may remove theirs upon placing their helmet on their head. It is advised that you purchase a clear plastic face shield to install on your child's helmet in lieu of the traditional cage. Though this is not mandated by the State or USA Hockey at this time, we have a strong suspicion that this may be implemented prior to the start of the season.



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5. The lobby and mezzanine will be closed to prevent congregating in close quarters. Only those making a purchase at the concession stand will be allowed in the lobby.
6. Bleachers will be open for parents only with six foot spacing and roped off areas. Congregating with those not residing in your household will **NOT** be allowed.
7. Siblings of players and children not involved with BYHA will **NOT** be allowed in the rink at any time until further notice.
8. Skate sharpening will be by appointment only.
9. Always maintain six foot spacing, follow markings on the floor.
10. Practice schedules will be staggered with a 30-minute gap in between to allow for sanitizing to take place and to limit the contact between the incoming and outgoing groups.
11. Players may not enter the rink more than 10 minutes prior to their scheduled practice to allow for sanitizing crew to finish their tasks.
12. Hand sanitizer stations will be located throughout the facility and we ask that you use them often.
13. No outside food and beverage may be brought into the rink other than player water bottles.
14. The concession stand will be open with the following guidelines set in place:
 - A. Plexiglass will serve as a barrier between server and patron.
 - B. Basket candy, bucket items, and condiments will not be accessible on the counter as in the past.
 - C. Maintain a six foot spacing between patrons while in line.
 - D. Limit touching of the counter and surrounding areas.
 - E. Those with symptoms of Covid will be prohibited from working the concession stand.



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On Ice Practice/Game Rules:

1. Individual skills/practices with physical distancing, small groups only. Players will be required to wear masks during practices, skills and games until further notice.
2. Players are to maintain six foot spacing during instruction and drills. Horseplay and violation of spacing rules will not be tolerated, and the player will be asked to leave by the coach or on-site Board member.
3. No spitting or spitting of rinse water onto the ice or other surfaces.
4. Non-contact practices only until further notice.
5. Acts of fake coughing or coughing in the direction of another individual will not be tolerated.
6. Players are not to use benches at this time, unless they have the ability to remain a distance from one another.



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BYHA Player/Parent Waiver

We are pleased to be able to open Edwards Ice Arena for the 2020/2021 hockey season. We know the players want to get back on the ice as do we all; however, for everyone's health and safety during the present pandemic, modifications are necessary and must be followed to allow for a safe and healthy environment. The City, County, State, and Ice facility has the right to suspend access to facilities if participants, teams, or organizations are not in compliance.

I understand the use of Edwards ice arena and BYHA's team participation involves an element of risk or danger for all participants and may cause serious injury, death, or property loss. I also understand participation during the COVID-19 pandemic may result in further risk of health consequences. In exchange for the opportunity to participate, I agree to assume these risks for my family and skater(s), and release the City of Beloit, Beloit Youth Hockey Association, USA Hockey, WAHA, Region 4, its coaches, staff, board members, and other participants from any liability for injuries, health consequences, and damages sustained while participating in these programs. I understand and accept that players will be scrimmaging/competing and have contact with other players on and off the ice.

Please return signed by Parent/Guardian and player:

Parent/Guardian Acknowledged: _____ Date: _____

Players Name Printed: _____ Age Group: _____

Players Acknowledged: _____ Date: _____

I hereby certify to the following:

In the past 24 hours I have experienced one or more of the following symptoms: Check one

Yes ___ No ___

- Cough
- Shortness of breath or difficulty breathing
- Fever of 100.4° F (38° C) or above



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- Chills
- Loss of taste or smell
- Muscle aches or pains
- Extreme tiredness
- Headache
- Sore throat
- Any other flu-like symptoms, such as gastrointestinal upset, headache, or fatigue

Within the last 14 days have you had close contact (within 6 feet or 2 meters for at least 15 minutes) with someone who has tested positive for COVID-19 virus or is suspected of having COVID-19?

Check one YES__ NO__

Have you traveled outside the country in the past 14 days to any regions affected by COVID-19?

Check one YES__ NO__