



ZIA YOUTH SOCCER LEAGUE

COVID-19 Vaccination Certification

I, _____, hereby certify that (check one or both as applicable) I am and/or my child, _____ is fully vaccinated* against COVID-19, and I am requesting an exemption to the State of New Mexico's current face-covering requirement as it applies directly to youth sports, as permitted by the State of New Mexico. I understand that the State of New Mexico requires Zia Youth Soccer to have this document on file in order to provide exemption, that my child's coach will be notified of my child's exemption, and that this signed document shall otherwise be kept private and confidential.

**"Fully vaccinated" is defined as having received both doses of a 2-dose vaccine series, or a single dose of the single-vaccine variation, at least two weeks ago.*

I certify that the information I am providing in this certification is true and correct, and understand that there are penalties for providing false statements. I further understand that should state, local, or federal regulations change to declare exemptions to mask-wearing in the youth sports environment no longer valid, any exemption provided based on this statement will be rendered void accordingly.

Signature

Date