

**Converse County
Request for Exception**

In accordance with the third continuation and modification of statewide Public Health Orders 1-3 Issued by Governor Gordon on April 28, 2020, a Request for Exception is made for a variance to the Orders.

Facility Name:	Glenrock Pool	Telephone:	
Contact Person:	Jaime Pinkerton	Telephone:	760-504-4393
		Email:	jaimepinkerton@gmail.com
Mailing Address:	PO Box 1884	Fax Number:	
City:	Glenrock	State/Zip:	Glenrock WY 82637
Order # for which this exception is being requested: 35-1-240			
Date on which this exception will begin: June 1st 2020			
Basis for Exception			
The specific reason(s) for the request, including why compliance with the order cannot be accomplished or should be given special consideration: I am trying to accomodate a swim clubs request so the team can practice together. They would like to allow more than 1 person per lane. I would also like my lap swimmers to have the option if allowed.			

CC Waves Distancing and Practice Policy for CDC and State of Wyoming Compliance during Covid-19 Pandemic

This policy will be in effect June 1st, 2020 at the CCSD#2 pool used by CC Waves Swim Club, Inc. Only USA Swimming registered swimmers, coaches, Glenrock Recreation Lifeguards and Staff and CC Waves Board Members will be allowed in the pool facility during any practice session. Procedures will be subject to change as new Policies come down from the CDC, Wyoming State Health Dept. or local authorities.

Social Distancing of 6 feet minimum shall be maintained by every person in facility, with the exception of family members and Lifeguards/Staff/Coaches providing emergency care if necessary.

Individual Health Verification

Prior to entering pool/locker room each day of practice, the following documented procedure will be followed:

Individual will have temperature taken and recorded. If temperature is 100F or higher, they will be asked to come back when they are no longer running a fever.

They will be asked if within the previous two weeks they have shown signs or symptoms, tested positive for, or been in contact with someone that has Covid-19. If response is "Yes," that date will be documented, and that person will be asked to not return until those two weeks are up.

Sign in Procedures

All CC Waves swimmers, coaches, parents and board members entering facility will be signed in by Glenrock Rec Center Lifeguards/Staff.

In Pool Distancing Procedures

The following illustration is the reason for the exception request – The CC Waves Swim team has approximately 10-15 swimmers on their summer swim team. The swim team is requesting that occasionally more than 6 swimmer be allowed in the pool at one time. The CC Waves is requesting two swimmers per lane on occasion.

There are six lanes in the pool. The CC Waves request is to allow one swimmer to start at the deep end and one swimmer to start at the shallow end. The swimmers will therefore pass each other in the middle of the lane for one to two seconds. Of significant note, the swimmers will be at least three feet apart as they pass each other.

By signing below, I attest that all information provided in this document is correct and will be followed. I also acknowledge that, if granted a copy of the approval will be clearly posted on the entrance to the facility it pertains to.

I understand that this request will be returned to Converse County Public Health and they will forward it to the County Health Officer. It will then be forwarded to the State Health Officer for approval. The time line for state approval is unknown at this time.

I understand I will not be able to operate under this plan until the request is approved.

I also understand approvals will be data-driven and based on state and county metrics.

By executing this request for exemption, the undersigned hereby acknowledges that they have reviewed the requirements of all statewide health orders, that the County Health Officer, the Incident Management Team and its members, as well as Converse County, Wyoming and its officials, have in no way represented whether or not this request will be successful and that the undersigned has completed this request without any promise or understanding from any of the above that this request will be approved. The approval authority lies first with the County Health Officer. If the Request satisfies the County Health Officer's review the Request will be forwarded to the State Health Officer for approval. Approvals are largely based upon the contents of the Request for Exemption.

PRINTED NAME	<i>Jaime Pinkerton</i>	SIGNATURE	<i>Jaime Pinkerton</i>	DATE SIGNED	<i>5/28/20</i>
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Submit completed form to: johnna.shepherd1@wyo.gov

Office Use Only			
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved with revisions <input type="checkbox"/> Not Approved	Comments:		
Signature: Mark S. Campbell, Co. Health Officer Converse County	<i>Mark S. Campbell</i>	Date Signed:	<i>5/29/2020</i>
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Approved with revisions <input type="checkbox"/> Not Approved	Comments:		
Signature: Wyoming State Health Officer	<i>Johnna Shepherd</i>	Date Signed:	<i>6/1/20</i>

Customer/Patron Use Only
If you feel this facility is non-compliant with the posted Covid-19 operating plan, please call 358-2536 or email: Johnna.shepherd1@wyo.gov

April 29, 2020