• US Passports Required

- Double check the expiration date ASAP (must be not within 6 months of expiration date
- Bring physical passport with you

• COVID-19 Vaccination Required

- $_{\odot}$ For all athletes 12 years old and up, vaccination is required last dose must at least 14 days prior to travel
- •You must bring the physical vaccination card (should show dates for both shots)

Negative COVID-19 Test no sooner than 72 hours from arrival to Canada -Required

- This must be a PCR test (rapid/antigen tests will not be accepted) a list of approved tests can be found <u>https://travel.gc.ca/travel-covid/travel-</u> restrictions/covid-vaccinated-travellers-entering-canada
- Schedule a test <u>https://www.uwmedicine.org/coronavirus/testing</u>

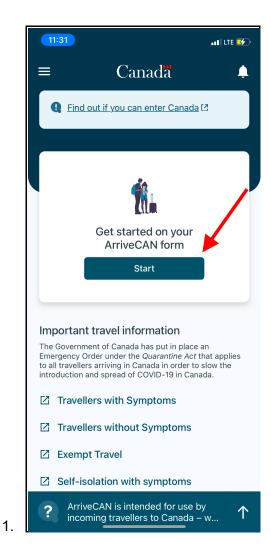
ArriveCAN App - Required

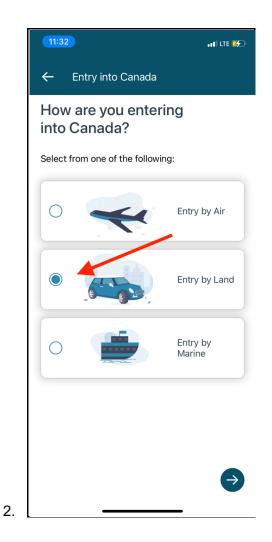
 Download the ArriveCAN App - <u>https://www.canada.ca/en/public-</u> <u>health/services/diseases/coronavirus-disease-covid-19/arrivecan.html</u>

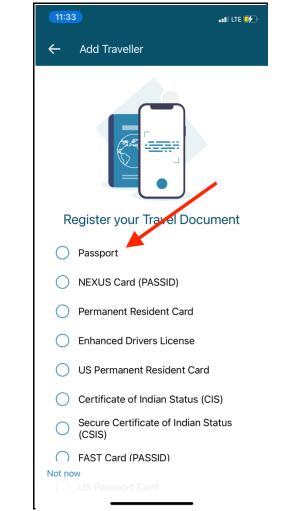
$_{\odot}$ Cannot complete until within 72 hours of trip

Complete all required trip information (see steps below)

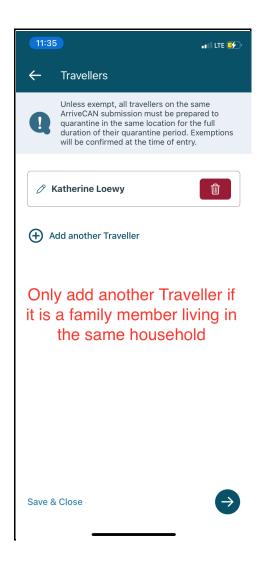
○ Steps:





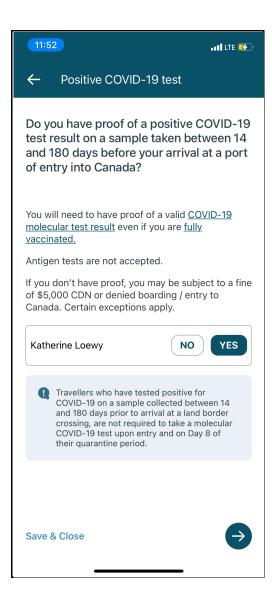


4. Use camera feature to automatically fill in Passport info



← Contact Information		
Contact Informatio	n	
Please provide your primary to where you can be reached wh		
* Primary Phone Number	Phone Type	
+1 425-214-6717	Mobile	
Secondary Phone Number (optional)	Phone Type	
	Home	
What is your official lang		
What is your official lang English		
English		

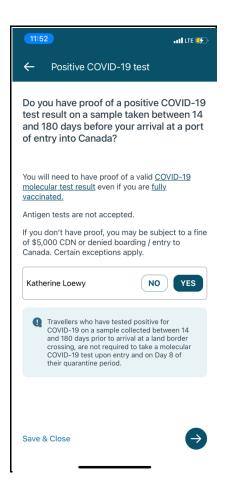
6.
7. Please use Katy's cell phone number as the primary contact

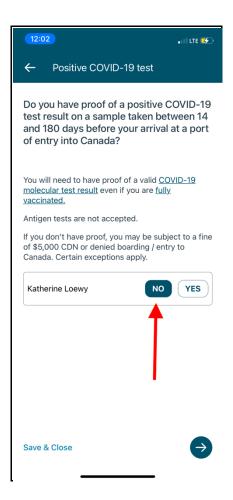


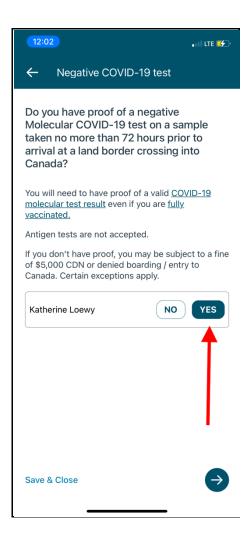


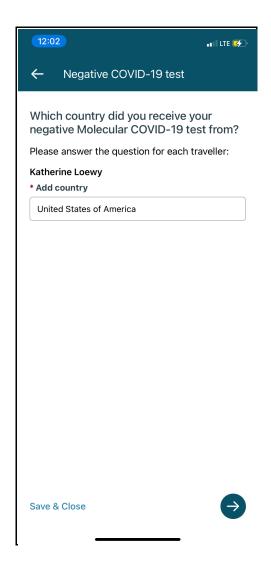
 Proof of vaccinat 	ion
Katherine Loewy	
Answer each question to pro vaccination	ovide proof of
Which COVID-19 vaccine dic first dose?	I you receive for your
Pfizer (Comirnaty, toziname	ran, BNT162b2)
In which country did you rec COVID-19 vaccine?	eive your first dose of
Travellers who received their (Canadian embassy abroad sho	
United States of America	
Date of your first COVID-19 mm-dd)	vaccine dose? (yyyy-
2021-02-21	
	dose of the
Have you received a second COVID-19 vaccine? NO YES Which COVID-19 vaccine did second dose?	
COVID-19 vaccine? NO YES Which COVID-19 vaccine did	l you receive for your

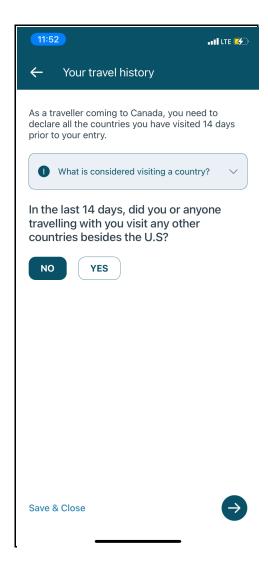
- 9.
 10. Enter in both first and second dose information
 Upload a photo of the front of you Vaccination card Use the same photo for the "second dose" image *Required to have both photos* 11.

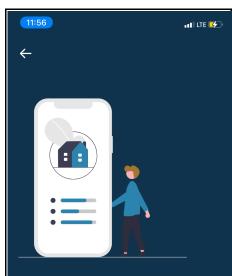








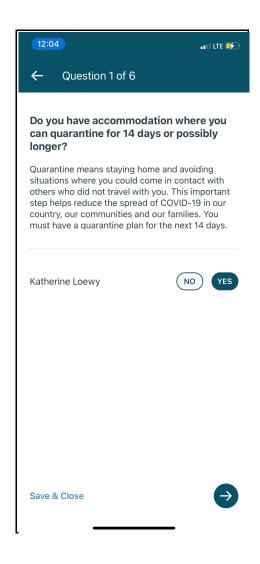


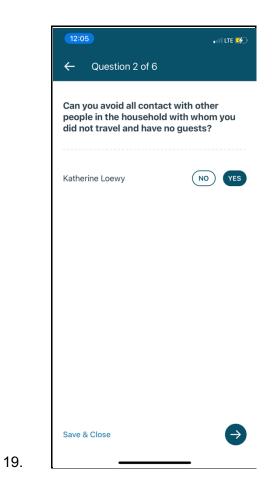


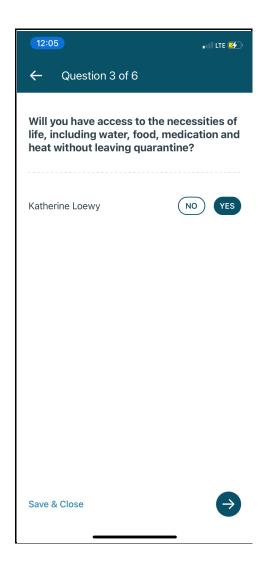
Let's complete your Quarantine Plan Questionnaire

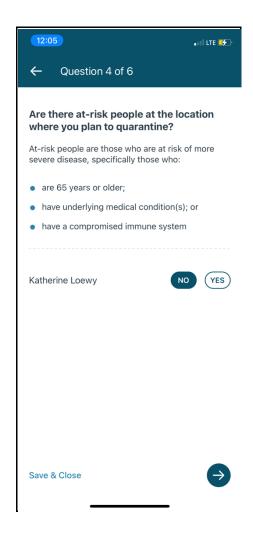
All travellers, even those who provide proof of qualifying vaccination(s) or positive COVID-19 test results, must show that they have a suitable quarantine plan in the event that their quarantine exemption is not approved by the Canada Border Services Officer.

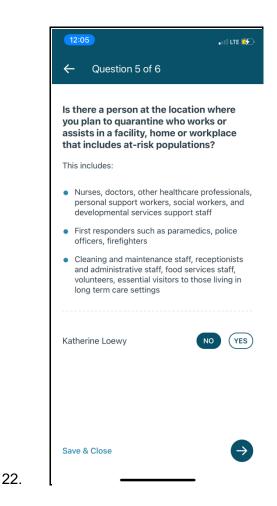
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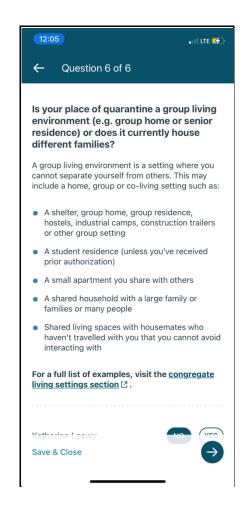




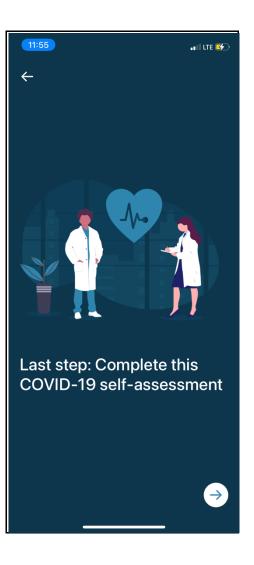


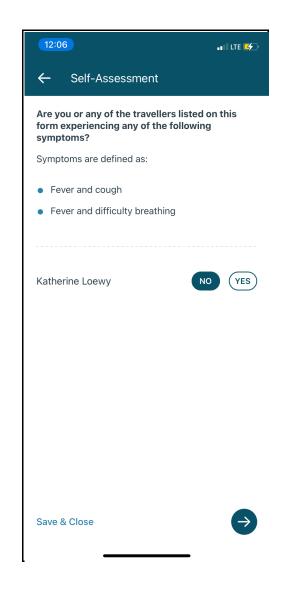


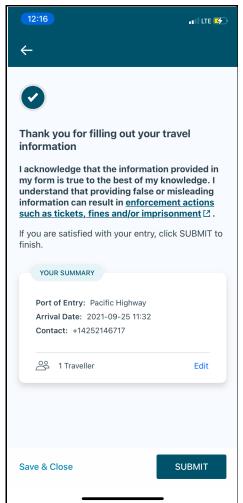




11:55	•••• LTE 💅
← Your quarantine location	
Destination type	
Returning home	
Staying with friends or family	
lotel, motel or rental accommo	dation
Other	
* Street name and number	
2040 Summit Dr	
Apt or Unit #	
* City	
Panorama	
* Postal Code	
VOA1TO	
* Province	
BC	
Save & Close	\rightarrow







27.
*Note- The Date will be the actual date of arrival (the above was just for example)
28. You can either Submit OR Save & Close to complete later