

Brighton & Hove Athletics COVID-19 Health Questionnaire

To ensure the Safety & Health of all people interacting with our Club, all club members/parents /visitors must complete this Declaration Form **PRIOR** to entering.

It is important that any person interacting with our Club is medically and physically fit and is not a danger to themselves or the health and safety of others. If you are not sure, you should seek medical guidance from NHS 111 <https://111.nhs.uk/covid-19/>

Your Name	
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Your Mobile No: (Parents if under 18)	
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Date/Day & Time of your visit	
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Please answer all questions below – Tick Yes or No

1. Do you consider yourself to be Fit and Healthy to resume training? Yes No
2. Are you experiencing any difficulty in breathing, shortness of breath? Yes No
3. Are you experiencing any fever-like/temperature symptoms? Yes No
4. Did you consult a Doctor or other medical practitioner within the last 14 days? Yes No
5. Have you contracted COVID-19 in the last 12 months? Yes No
6. If you answered "Yes" to question 5 do you require extra support in returning to athletics. Yes No
7. Have you had a COVID-19 vaccination? Yes No

If you have answered "YES" to any of the questions 2 through 4 or have indicated to us that you have symptoms of COVID-19 you should not attend the athletics club. You are prohibited from entering the grounds/facilities and advised to seek professional medical help/assistance.

If you subsequently test positive for COVID-19 - having attended a Club session - please inform your coach; Serena Smith (077-1420-8468) or Sarah Hewitt (077-5323-9056) asap.

Signature
(parent of under 18)

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Date:

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