	en prior to arrival at training or y do not have any of the following ntial indicators of COVID-19 infection	Check Negative	Check Positive
Temperature above 37.8°C			
New continuous cough			
Shortness of breath			
Sore throat			
Loss of or change in normal sense of taste or smell			
Feeling generally unwell			
Been in contact with or living with a suspected or confirmed case of COVID-19 in the previous two weeks			
Participant Name	Signature (Parent if U18)	Date	I

	en prior to arrival at training or y do not have any of the following Itial indicators of COVID-19 infection	Check Negative	Check Positive
Temperature above 37.8°C			
New continuous cough			
Shortness of breath			
Sore throat			
Loss of or change in normal sense of taste or smell			
Feeling generally unwell			
Been in contact with or living with a suspected or confirmed case of COVID-19 in the previous two weeks			
Participant Name	Signature (Parent if U18)	Date	ı

	en prior to arrival at training or y do not have any of the following Itial indicators of COVID-19 infection	Check Negative	Check Positive
Temperature above 37.8°C			
New continuous cough			
Shortness of breath			
Sore throat			
Loss of or change in norma	I sense of taste or smell		
Feeling generally unwell			
Been in contact with or livir confirmed case of COVID-1	ng with a suspected or 9 in the previous two weeks		
Participant Name	Signature (Parent if U18)	Date	

Each participant should self-screen prior to arrival at training or footballing activity to ensure they do not have any of the following symptoms as these are the potential indicators of COVID-19 infection		Check Negative	Check Positive
Temperature above 37.8°C			
New continuous cough			
Shortness of breath			
Sore throat			
Loss of or change in normal sense of taste or smell			
Feeling generally unwell			
Been in contact with or living with a suspected or confirmed case of COVID-19 in the previous two weeks			
Participant Name	Signature (Parent if U18)	Date	ı