

Bushido Martial Arts Covid 19 Pre return to class screening form:

This form must be sent back to your instructor filled in and signed, **BEFORE**, you are able to return to class. You can print sign take a picture and then send it back to coach, or you can print, sign, scan and return it by e mail. **If any of the answers below change in the next 14 days, it is your responsibility to immediately inform your instructor and the club CV 19 officer.**

All people interacting with our club, all club members/parents/visitors must complete this declaration Form PRIOR to entering, sending it to : roy.baker@sse.com or 0876775614

Your Name/Child's Name:	
Your Mobile No (parents' number if under 18):	
Class Group	

Please answer all questions below - tick yes or no .

Q No	Question	Yes	NO
	Have you visited any of the countries outside Ireland excluding Northern Ireland?	Yes	NO
	Are you suffering any flu like symptoms/symptoms of coronavirus covid-19?	Yes	NO
	Are you experiencing any difficulty in breathing, shortness of breath?	Yes	NO
	Are you experiencing any fever-like/Temperature symptoms?	Yes	NO
	Did you consult a Doctor or other medical practitioner within the last 14 days ?	Yes	NO
	How are you feeling Healthwise?	Unwell	Well
	Have you been in contact with someone who has visited an affected region in the past 14 days	Yes	NO
	Have been around someone with symptoms of Covid-19 in the last 14 days?	Yes	NO
	Is a member of your household self-isolating?	Yes	NO
	Are you in a period of self-isolation under the current Health Policy Rules?	Yes	NO
	Are you in a high-risk health category?	Yes	NO

If you have answered "YES" to any of the questions above or have indicated to us that you have symptoms of COVID-19 you should not attend the athletics club. You are prohibited from entering or using the grounds/facilities and advised to seek professional medical help/assistance. NOTE: When on site, please adhere to our on-site standard processes/procedures regarding infection control, i.e. social distancing, hand washing/hand sanitising and general coughing/sneezing etiquette?

Signature Visitor: _____

Date: _____

Signature of Parent/Guardian required for under 18s

Date:

Reminder if any of these answers change it is your responsibility to inform the coach AND Covic 19 club officer