



# COVID-19 Checklist

Name as shown on driver's license		
Membership no. (if a Club member)		
Address		
Phone number		
Email address		
Places you have visited in past 14 days		
<b>Within the past 14 days...</b>	<b>YES</b>	<b>NO</b>
Have you had any contact with anyone diagnosed as having the Coronavirus? If yes, please explain: _____		
Have you been in quarantine for any period?		
Have you ever tested positive to Coronavirus?		
Have you experienced any of the following symptoms:		
▪ Fever		
▪ Cough		
▪ Fatigue		
▪ Sore throat		
▪ Chest pains		
▪ Congestion		
▪ Headache		
▪ Chills		
▪ Nausea/vomiting		
▪ Diarrhea		
<b>Conditions of returning to play bowls. I will...</b>	<b>YES</b>	<b>NO</b>
Not attend bowls if I am feeling unwell (have any of the symptoms above)		
Arrive five minutes before practice/play and sanitise equipment if required		
Wash and sanitise my hands prior to commencement of practice/play		
Maintain a minimum of 1.5 metres of distance between myself and any other person at all times		
Only use the rink I have been allocated for practice/play		
Only touch the jack, mat, scoreboard and drink holders on my designated rink		
Not share equipment with any other player		
Wash and sanitise any equipment used immediately after completion of practice/play		
Wash and sanitise my hands immediately after completion of practice/play		