**COVID-19 Player Declaration**

In the interest of protecting the health and well-being of our players and officials, please complete the following form prior to participation in a tennis competition.

We ask that you are honest and take your share of responsibility when responding to the following questions, so that we can all do our best to prevent the spread of COVID-19.

***Due to the Victorian government’s COVID-19 Restricted Activity Directions, please read and complete the following acknowledgements:***

Name:

Tennis Club: ………………………………………………………………………………………….

|  |  |  |
| --- | --- | --- |
| **Acknowledgement**  | **True** | **False** |
| I have not returned from overseas in the past 14 days |  |  |
| I am not required to be in self-isolation/self-quarantine |  |  |
| To the best of my knowledge, I have not been in close contact with a person who has a reported or suspected case of coronavirus (COVID-19) in the past 14 days |  |  |
| I have not had a fever, cough, sore throat, shortness of breath or other cold/flu-like symptoms in the last 72 hours and am otherwise well |  |  |

# Contact Details

Phone Number:

Email address:

I agree to comply with all Guidelines relating to Return to Tennis and Covid-19.

I declare that the answers I have provided above are true and accurate for myself.

Signature: Date:

Parent / Guardian signature if player is under 18 years of age \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Guardian name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_