



**COVID-19 DECLARATION OF HEALTH**

**(to be completed by each Athlete and delivered to the applicable Provincial COVID-19 Compliance Officer )**

Name of SAPPR Member	
SAPPRF Number	
Email Address	
Contact Number	
Physical Address	

1. If I have an underlying condition that is likely to increase my risk from exposure to COVID-19:
  - 1.1. I will notify SAPPRF under a separate process, about my underlying condition information.
  - 1.2. Based on my underlying condition – SAPPRF will apply a risk assessment process and determine a course of action/accessibility to training/competition.
2. I hereby submit this unconditional acceptance of declaration of health, and confirm I will not enter a SAPPRF training/competition venue/ event at any time when I exhibit any of the following signs/symptoms:
  - 2.1. Fever.
  - 2.2. Cough.
  - 2.3. Shortness of breath.
  - 2.4. Sore throat.
  - 2.5. Loss of taste or smell.
  - 2.6. Rash on palms of hands;
3. If I have any symptoms, I will self-isolate and I should get a COVID-19 test to confirm my status. Should this be positive, I will remain off site until clear.
4. I confirm, to the best of my knowledge, I have not been in close contact with anyone exhibiting COVID-19 symptoms.
5. I confirm, to the best of my knowledge, I do not have COVID-19, nor have tested positive. If I have previously test positive, then I will provide a doctor’s letter and proof of positive test after I have been self-isolated or quarantined and are now clear of the disease.
6. I will provide all Traceable Contact details and address details that would allow for easy tracking/tracing should these details be requested by the relevant authorities.
7. I will wear an appropriate face mask, and relevant PPE always when on a training/competition venue.
8. I will always act responsibly and follow authorised instructions.
9. I understand and agree to abide by the SAPPRF COVID-19 Protocols and Policies.
10. I accept and understand the SAPPRF Constitution, Rules, Regulations, Code of Conduct, Social Media Policy, Judicial Code and other policies are implicit in this declaration.

Signature			
Date		Location	