

INDOOR CHECKLIST

ASSOCIATION/VENUE/COMPETITION NAME: _____

COVID-19 CONTACT PERSON: _____

EMAIL: _____ PHONE: _____

YES NO

CHECKLIST

1. Does the Association/Venue/Competition Facilitator have a COVID-19 Safety Plan (Plan)?
2. Has the Association/Competition designated a COVID-19 Safety Contact Person?
3. Are there procedures in place for laying and packing boards/goals, including the sanitisation of this equipment?
4. Do employees, Umpires, Technical Officers and/or volunteers performing functions, understand their roles and responsibilities in relation to the Plan?
5. Have the participants in the competition been advised to review and adhere to, the Individual Checklist (see Hockey NSW Info Hub)?
6. Has the Competition Facilitator reinforced the need for:
 - Complying with the Attendance Register mechanism
 - Physical distancing
 - Good hygiene practices
 - No handshakes, high fives or group celebrations &
 - No mingling i.e. "Get in, Play, Get out"
7. Is there appropriate signage displayed at the venue?

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