



CLUB CHECKLIST

YES NO

FULL NAME: _____
CLUB: _____

1. Do you have a Club person identified as the contact person for all COVID-19 related questions/issues?

Full Name: _____

Email: _____ Phone: _____

2. When your Association/Venue COVID-19 Safety Plan has been developed, have you identified a plan to communicate this to your club members?

3. Has the Club arranged training and playing times with the Association/Venue controller to cater for venue capacity limits as per NSW Health regulations?

4. Has the club promoted with members checking in and out of venues via the Service NSW QR Code at entry/exit?

5. Has the club reinforced on-field protocols in relation to maintaining distance including

6. Has the Club promoted to their members good hygiene practices, such as:

- Regular and thorough handwashing
- Encourage them to carry hand sanitiser
- Covering a sneeze and cough with elbow or a tissue
- Avoid close contact with people who are unwell
- No touching of eyes, nose or mouth
- No spitting or clearing nasal/respiratory secretions on turf/fields
- No sharing of drink bottles or towels; and
- Maintaining distancing (1.5 metres), where appropriate, to spectate e.g. a parent.

7. Have you communicated the need for Club members to review and adhere to the Individual Responsibilities Checklist?

