TABLE TENNIS WALES

Covid-19 Self-Declaration Statement

To be completed by the athlete/parent:

- I do not currently have symptoms of COVID-19 (new persistent dry cough, fever, loss of taste or smell)
- I have not had a positive test for COVID-19 or onset of symptoms of COVID-19 in the last 10 days. (Individuals who have completed their period of isolation (10 days) and have no remaining symptoms (other than a dry cough or loss of taste or smell which can last for some time) may return to normal activities)
- No member of my household has had symptoms of COVID-19 or has tested positive for COVID-19 in the last 14 days
- I have not been contacted by a contact tracer from the Test, Trace and Protect Programme and told to isolate in the last 14 days as a contact of someone with confirmed COVID-19
- I have not returned from a country outside of the UK in the last 14 days, other than those on the exempt list (https://gov.wales/exemptions-self-isolation-coronavirus-covid-19-html)

I agree/do not agree* to the above statements and will inform you of any changes to symptoms prior to every training session and/or competition. (*Delete as necessary)

Print Name:
Signature:
Date:

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