

Swim England South East Festival of Swimming 2021 Health Declaration (v3 25/7/21)

Swimmer (or Participant) Full Name	
Club	
Do you currently have any of the following COVID symptoms: • A high temperature • A new continuous cough • Loss or change to your sense of smell of taste	Yes / No
Have you or anyone else in your household returned a Positive COVID Test (PCR or Lateral Flow) within the last 10 days? If you had a positive Lateral Flow test followed by a negative PCR test, you may answer no this question.	Yes / No
Have you visited or passed through a Red or Amber list country in the last 10 days?	Yes / No
Are you living in a household with anyone who has COVID symptoms or are currently asked to self-isolate by NHS track and trace or a medical practitioner?	Yes / No
If you have had COVID-19 have you had the required period of self-isolation and appropriate swimming training time to allow for safecompetition?	Yes / No / Not Applicable
Do you agree to follow the published measures and on the day instructions from the promoter, leisure centre operator and any of the volunteers organizing this event?	Yes / No
Please provide a contact eMail and or phone number for Track and Trace purposes.	

Please complete all sections before arriving at the competition, show the form to the person on the registration desk and deposit it in the box provided. If at any time after you complete this questionnaire you feel that you have one or more of the the symptoms or feel at risk then please talk urgently to the Covid lead / meet team.

This form will be used only for the purposes of operating the meet under current Covid guidelines, will kept secure and destroyed after the statutory requirement for retention has expired.