

Morinville Minor Soccer Club

COVID – 19 Symptoms Checklist for Coaches/Volunteers/Participants

Do you/your child have any new onset (or worsening) of any of the	CIRCLE ONE	
following symptoms:		
• Fever	YES	NO
Cough	YES	NO
Shortness of Breath	YES	NO
Sore Throat	YES	NO
• Chills	YES	NO
Painful Swallowing	YES	NO
Runny Nose / Nasal Congestion	YES	NO
Feeling Unwell / Fatigued	YES	NO
Nausea / Vomiting / Diarrhea	YES	NO
Unexplained loss of Appetite	YES	NO
Loss of sense of taste or smell	YES	NO
Muscle / Joint Aches	YES	NO
Headache	YES	NO
Conjunctivitis (commonly known as pink eye)	YES	NO
Has the person attending the activity/facility travelled outside of Canada in the last 14 days?	YES	NO
Have you/your child had close unprotected* contact (face-to-face contact (within 2 meters/6 feet) with someone who has travelled outside of Canada in the last 14 days and who is ill**?	YES	NO
Have you/your child attending the program or activity had close unprotected* contact (face-to-face contact within 2 meters/6 feet) in the last 14 days with someone who is ill**?	YES	NO
Have you/your child or anyone in your household been in close unprotected* contact in the last 14 days with someone who is being investigated or confirmed to be a case of COVID-19?	YES	NO

^{* &}quot;unprotected" means close contact without appropriate personal protective equipment (PPE)

If an individual answer 'YES' to any of the questions above, they are not to be permitted to participate in training for a minimum of 14 days UNLESS a negative Covid-19 test result is received after answering 'Yes' to the above.

^{** &}quot;ill" means someone with COVID-19 symptoms on the list above

^{*}Essential workers who travelled outside of Canada for work-related purposes are exempt to travel restrictions and may be permitted to participate.