



COVID-19 LEVEL 3

Sport Plans for Non-Contact Sports and Training for Professional Athletes

[Submit Sport Plans HERE.](#)

Covid-19 Level 3 : Sport Plans

Sports Body Details	Covid-19: Level 3 Details	Activities Data
Sports Body Details		
Category* <input type="text"/>		
Sport Code* <input type="text"/>		
Name of Sports Body (name your document to be uploaded later the same as this name) <input type="text"/>		
Province* <input type="text"/>		
District* <input type="text"/>		
City/Town Name <input type="text"/>		
Postal Code <input type="text"/>		
Affiliated Federation <input type="text"/>		
Sports Body: Public Officer (PO)		
Public Officer (PO) <input type="text"/>		
PO: Full Name <input type="text"/>		
PO: ID Number <input type="text"/>		
PO: Gender <input type="text"/>		
PO: Ethnic Group <input type="text"/>		
PO: Land Line <input type="text"/>		
PO: Cell Number <input type="text"/>		
PO: Email <input type="text"/>		
Sports Body: Covid-19 Compliance Officer (CO)		
CO: Full Name <input type="text"/>		
CO: ID Number <input type="text"/>		
CO: Gender <input type="text"/>		
CO: Ethnic Group <input type="text"/>		
CO: Land Line <input type="text"/>		
CO: Cell Number <input type="text"/>		
CO: Email <input type="text"/>		

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COVID-19 Readiness

Have Covid-19: Level 3 Operational Plan? (Must be included in final document in .pdf)

Have Covid-19: Travel Guidelines? (Must be included in final document in .pdf)

Have Covid-19: Personal Declaration Form? (Must be included in final document in .pdf)

Covid-19: Daily Screening Questionnaire? (Must be included in final document in .pdf)

Covid-19: Temperature checks

Temperature checks done on entry?

Temp Machine (IR Non Contact Thermometer)

Number Recovered from Covid-19:

Support Staff:

Players:

Number Completed Quarantined:

Support staff:

Players:

Number in vulnerability groups ?

Support Staff:

Players:

Indoor Facilities

Will pre-activity cleaning be done?

Will post-activity cleaning be done?

Time cycle of "thorough cleaning / deep-cleaning"? (eg. 24h / 48h)

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Activities Data

Training

Training Resumption Date:

yyyy / mm / dd

Training Sessions per 7-day week:



Non-contact Sport

Official Matches Resumption Date: (Full Fixture List
Must be included in final document in .pdf)

yyyy / mm / dd

Official Matches per month:



Official Training:



Number of venues for Official Matches:



Top Sporting Venue based on number of participants per day

Venue name

Participants per day at this Venue

Province

Municipal District

City

Suburb

Postal Code

Upload FULL SPORT PLAN in .pdf format (size of upload not to exceed 6MB):

Please name your document the same as the "Name of Sports Body" field in the first page of this submission.

Browse...

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