Safe Return to Baseball/Softball – Covid-19 Prevention Guidelines
Disclaimer

While the advice given in these guidelines has been developed using the best information available, it is intended purely as guidance to be used at the user’s own risk. No responsibility is accepted by WBSC or by any person, firm, corporation or organisation who or which has been in any way concerned with the furnishing of information or data, the compilation, publication or any translation, supply or sale of this Guidance for the accuracy of any information or advice given herein or for any omission here from or from any consequences whatsoever resulting directly or indirectly from compliance with or adoption of guidance contained therein even if caused by a failure to exercise reasonable care.
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1. Introduction

The principal purpose of this document is to provide a framework and general recommendations to the WBSC Baseball and Softball community, during the global COVID-19 Pandemic, for the safe return to the practice of our sports.

This document has been developed in accordance with the World Health Organization (WHO) guidelines on the organisation of sporting events and with input from the WBSC Medical Commission. It is a live document that will be periodically updated as the global situation continues to evolve.

Specific prevention measures and adjusted protocols for WBSC Events will be defined and announced in conjunction with the National Authorities of each Local Organising Committee in due time.

Who should read this document?

Member Organisations may use this framework to establish measures and protocols for return to competition within their own jurisdiction. Such measures shall be in total compliance with WHO recommendations, government regulations and local laws, including those specific to the Covid-19 Pandemic. Legislation changes shall be monitored and compliance adjusted accordingly when needed.

2. General Guidelines

2.1. Risk Assessment

An event is considered a “Mass Gathering” if the number of people it brings together is so large that it has the potential to strain the planning and response resources of the health system in the community where it takes place.

Large sporting events such as Baseball/Softball World Cups, continental and national championships qualify as Mass Gatherings.

Member organisations shall assess their events following the WHO Risk Assessment and Mitigation Checklist for Mass Gatherings in the context of COVID-19. This is an operational tool that offers guidance for organisers holding meetings during the COVID-19 outbreak and that should be accompanied by the WHO COVID-19 Generic Risk Assessment Excel file available on the WHO website. It is advisable to conduct the risk assessment in cooperation with local Public Health Authorities, explaining and coordinating with them the specific baseball/softball measures to be implemented.

After assessing your event, the risk versus mitigation matrix below will help you identify the risk level:
**Risk Assessment shall be done in coordination with the local authorities.**

### 2.2. Prevention and Protection Measures

To establish the prevention and protection measures to be implemented in your event, the first step is to identify a Health Safety Manager, supported at least by an appropriate clinical advisor (i.e. Doctor). The list of responsibilities among others, would include:

- Develop baseball/softball and location specific Covid-19 Risk Assessment and Mitigation Checklist;
- Act as the point person to coordinate with the local health authorities, especially with the identification, isolation and if necessary transportation of ill or virus exposed participants;
- Oversee implementation of education, prevention, protection and treatment measures for the various groups of participants;
- Designate the key support staff and their roles in the education, prevention, protection and treatment measures;
- Document that all event participants have undergone appropriate training in personal safety and emergency mitigation measures (including those specifically listed in the WHO Risk Assessment Tool).
While developing and formulating the Health Safety Plan, general prevention and protection measures should include:

- Identification of the different groups of people involved in the event (i.e. athletes, coaches, officials, event staff, accompanying persons, venue personnel, etc.) and establish safety protocols for potential interactions among them;

- Determination of the flow of different groups of people throughout the venue to avoid excessive gatherings and unnecessary contact, as well as to identify informational displays and sanitation station locations;

- Establishment of specific security distance requirement for each aspect and location of the event. Consideration is to be given to WHO recommendations on social distancing. A physical distance of two (2) meters is preferable where possible for effectively decrease transmission from respiratory droplets. One (1) meter distance should be the minimum;

- Determination of who, when and where protection equipment, e.g. masks and gloves, shall be used;

- Establishment of cleaning protocols and requirements for sanitizing stations at the venues;

- Assurance of individual risk acceptance by participants, if necessary, by signed releases and event insurance when possible.

### 2.3. Education and Communication

Setting an education, communication and monitoring plan is strongly recommended to ensure the prevention measures are properly understood and implemented. This shall include, at a minimum:

- Development of health advisories for all event participants and spectators, both in digital and printed versions;

- Identification of methods to communicate measures and protocols (i.e. email, social media, websites, printed displays, public announcer, etc.);

- Identification of key locations at each venue to post health advisories (i.e. access routes, common use spaces, etc.);

- Preparation and execution of proper training for all participants: event staff, volunteers, athletes, coaches, officials, etc.;

- Determination of a risk communication strategy for COVID-19 before the event. A potential incident during the event may draw significant media attention. It will help avoid inaccurate and unnecessary disinformation. A Media Manager and/or spokesperson should be appointed for this purpose;
➢ Coordination with major social media sites like Twitter and Facebook, Instagram should be set up so that messaging can be coordinated with, and assisted by, those platforms.

2.4. General Recommended Standards

The list of recommendations below set out the minimum standards for the organisation of Baseball/Softball/Baseball5 competitions. These guidelines will help mitigate the risk of COVID-19 infections – they cannot eliminate it completely. Any return to competition and implementation of this guidance should be established in conjunction with the relevant national authorities.

➢ Implementation of Safe Physical Distance:
  o Minimum one metre, preferably two metres during and after physical activity;
  o If spectators are in attendance, specific spectator measures for physical distancing shall be set as required/recommended by the local public health authorities.

➢ Establishment of hygiene standards:
  o Wash hands frequently for at least twenty (20) seconds;
  o Avoid touching eyes, nose and mouth with your hands;
  o Sneeze and/or cough in a tissue or the internal crease of the elbow. Avoid contact of hands with personal respiratory points;
  o Provide appropriate contactless, closed containers for all disposable and reusable hygiene material (e.g. tissue, towels, etc.) in all rooms.

➢ Prevention devices:
  o Use of gloves and personal face masks by all event personnel;
  o Use of visors and other Personal Protective Equipment (PPE) for medical personnel;
  o Use of physical barriers (e.g. plexiglass) at points of interaction between event personnel and spectators (e.g. concession or ticket stand).

➢ Equipment:
  o Avoid sharing personal devices such phones, computers, tablets, etc.;
  o Avoid personal clothing/equipment being left in common places. Store inside personal bag always;
  o Avoid sharing of competition equipment. Each athlete should have his/her own bat, helmet, glove, batting gloves, rosin bags, etc.;
  o Provide personalised water bottles or disposable cups. Under no circumstances shall be shared.

➢ Participants:
  o Avoid participation of high-risk demographics (age and health):
    ▪ Pre-travel and pre-event health checks with certificate highly encouraged/mandatory.

➢ Venues:
  o Thorough disinfection of common spaces before/after competition including:
    ▪ Locker rooms;
    ▪ Dugouts;
    ▪ Common areas;
    ▪ Concession/Food stands;
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- Vending machines;
- Lifts;
- Training room;
- Doping Control Station;
- Maintenance equipment;
- Service cars;
- Door handles;
- Any other spaces that come into frequent touch.

  - Establishment of sanitation stations with alcohol-based hand sanitisers and collection system for potentially infected waste (i.e. disposable tissues, masks, gloves, etc.) at all entrances/exits;
  - All working spaces and provided facilities must be organised in a way that physical distancing is respected;
  - In all the key accredited zones (athletes’ area, VIP, media, working spaces), hand washing/hand sanitation facilities must be provided;
  - Provide disinfectant wipes and advise venue cleaning staff to disinfect door handles, toilet handles, bathroom faucet handles, etc. in all areas several times per day.

➢ Spectators:
  - If/when allowed, make sure to coordinate with, and follow local authorities’ guidelines strictly;
  - Ensure physical distance from participants:
    - No reaching over for autograph signings or pictures with athletes on foul lines or any other locations;
    - Restricted access to Tournament Officials strictly enforced;
    - Reinforce access control to accredited participants spaces (i.e. Media Tribune, TV camera positions, etc.).

➢ Communications:
  - Display signs to inform spectators and event staff about ways to prevent being infected and passing the virus to others;
  - Use the Public Announcer to repeat important recommendations and advice.

3. Return to Competition

3.1. Member Federations / Organisations

Management of Return to Activity

This section is for administrators and officials who will be creating and/or implementing policies for the return of activity to their respective members/clubs. Members are strongly recommended to develop their own specific written policies and operating protocols. Such policies and protocols must be compliant with WHO guidelines together with local legislation and COVID-19-specific policies issued by government and local health authorities. Changes to such legislation and policies should be monitored closely to amend their own policies as required, ensuring that the baseball/softball community in their jurisdiction is applying best practice and complying with local requirements.
Members should be conscious of the risks involved in allowing players to return to training and playing. The WHO mass gathering risk assessment and measurement tool – for sports federations, are useful measures of an organisation’s preparedness for hosting teams, and ultimately matches.

**Preparation for Return to Activity**

Each Member should appoint a Health Safety Manager with operational knowledge regarding COVID-19 as mentioned in Section 2.2 of this document. The manager should coordinate efforts within their Federation/Organisation for a phased approach of return to training and play. They shall coordinate with clubs and competitions providing information and strategic support.

The manager shall liaise with local public health and government agencies to present:

- A return to training and play strategy with specific prevention measures in each phase. This strategy should be aligned to WHO guidelines and risk assessed using the WHO mass gatherings Risk Assessment Tool;

- Evidence that all players, coaching, and support staff have undergone appropriate training in personal safety and emergency mitigation measures (including those specifically listed in the WHO Risk Assessment Tool);

- A clear communications strategy between Federations, clubs, competitions and with national and international government officials, the general public, and the media;

- A public health messaging strategy across the Federation/Organisation, its members, clubs and competition platforms.

Each Member should help clubs and competitions to identify and appoint one or more Health Safety Coordinators, to be responsible for implementing the guidance in this document, and all other relevant guidance and legislation regarding COVID-19, in training facilities, competition venues and team services (travel, transport, accommodations, meals, etc.).

Each Member should check with its insurers before permitting return to activity or competition to ensure that any such activity is adequately insured and that any additional steps required by a particular insurer are considered.

All Members should ensure that their policies are understood by players and staff and that they accept the risks involved in returning to training and playing.

Members should ensure that they have adequately dealt with any data protection requirements of local law (e.g. GDPR) in relation to the collection of data and information specific to managing the return to activity/competition. For example, the collection and storage of information relevant to contact tracing or the sharing of a player or staff member’s medical information with teammates, opposition teams or media would need to be considered.
3.2. Participants (Athletes, Coaches, Officials, Event Staff, LOC staff & Volunteers)

In addition to the general recommended standards included in section 2.4, other specific recommendations for event participants are listed below.

**Recommendations:**

- Pre-travel and pre-event health checks for all participants are highly advisable to ensure exclusion of those with potential additional risks;
- Team medical staff present at an event must monitor the health status of athletes daily;
- All individuals must proactively and regularly check health status (including taking temperature and monitoring for any symptoms);
- If feeling ill or unsure about symptoms, the participant shall not go to the venue. Contact designated official for proper check-up;
- Keep at least one metre distance from other people, two metres immediately after exercise;
- Cover your mouth and nose with a tissue or your sleeve (not your hands) when coughing or sneezing;
- Frequent hand washing by participants using soap and hot water or alcohol-based (at least 65–70%) hand rub for 20 seconds;
- Avoid shaking hands, fist bumps or hugging;
- Avoid showering at club facilities, steam rooms or sauna;
- Avoid touching own mouth, nose or eyes;
- Use individual means of transport when possible. If organised carpooling, keep at least one empty seat between two people;
- Arrive to venue changed, avoid using locker rooms when possible;
- Recommended protocol for the use of water bottles:
  - All athletes, officials and staff should have their own water bottle to prevent transmission of viruses and bacteria;
  - Bottles should be labelled and washed (with dishwasher soap) after each practice/game;
- Be aware of regular cleaning of frequently touched items (i.e. door handles, elevators, gym equipment, etc.).
Athlete’s Return to Activity

Athletes cannot return to their activities without considering the harmful effects of detraining. In fact, athletes may be exposed to situations of early fatigue due to reduced aerobic capacity or to injuries due to impaired muscle function, which can result in being counterproductive for his/her health.

When designing and carrying out physical exercise sessions, it will therefore be important to comply with certain indications in terms of intensity, frequency, volume and method of exercise. A gradual increase is very important: after a period of reduced training it is essential to understand the importance of following a period of gradual re-training. A resumption of physical activity by increasing both volume and intensity but without modulating recovery periods could lead to excessive fatigue or, in some cases, cause muscle injury or health problems.

The “physical reconditioning” should include a training program containing postural, stretching, core-stability and balance exercises to increase muscle tone and, at the same time, a program of endurance activities to improve aerobic capacity. Later it would be appropriate to gradually introduce the sport’s specific movements.

Until it is possible to return to full squad practices, outdoors and/or at the gym, the suggestion is to maintain an active lifestyle, by dedicating at least 45-60 minutes every day practicing activities that allow the maintenance of a good state of health combining aerobic activities with muscle strengthening and flexibility exercises. The workout intensity must vary according to individual physical and training conditions, as well as climatic conditions, possibly gradually increasing over time.

3.3. Event Organisers

COVID-19 brings significant challenges to the organisation of events. Organisers will be tasked to implement all possible prevention measures. Building trust between the Local Organising Committee and the local health authorities will be a determining factor for the safety of the event. We will need to be creative and be open to new ideas that should be shared among the entire baseball/softball community for everyone’s benefit.

The WBSC strongly advises event organisers to follow all the regulations and measures established by the local authorities, governments, and LOCs of each country, as well as the recommendations from the WHO.

The IOC has advised that during the evolving COVID-19 outbreak, effective protection of the health and safety of athletes must remain a priority. Under the IOC regulations, event organisers must ensure all athletes are covered by adequate measures to protect their health and that they have access to prompt medical care while participating in the event. Event organisers must put in place preventive measures to minimise the risk of infection. Event organisers must ensure that any athlete or participant in an event on their territory who needs immediate medical care is given access to medical facilities.

In addition to the general recommended standards included in section 2.4, other specific recommendations for event organisers are listed below.
General:

➢ The number of participants involved should be reviewed and kept down to the absolute essential (e.g. Team delegations, Tournament Officials, Event staff, Volunteers, etc.);

➢ Soap and water or alcohol-based hand sanitisers and tissues should be accessible in all common areas and especially in the medical treatment areas;

➢ Availability of masks for all tournament personnel;

➢ Towels should be for individual and single use only;

➢ Appropriate contactless closed containers should be provided for disposable and reusable materials;

➢ Ensure availability of thermometers (e.g. infrared) to check all accredited participant’s temperatures;

➢ Social gathering of event participants, LOC team and volunteers shall be kept to a minimum;

➢ Working conditions shall follow recommendations from the local authorities;

➢ The need for holding an Opening Ceremony and/or Medal Ceremony should be assessed carefully. If necessary, it should respect the physical distance and hygiene measures established for the tournament.

Event Services:

➢ Transport
  o Encourage individual commute when possible;
  o If car/buses need to be shared, ensure minimum security distance with a minimum of one empty seat between guests;
  o All passengers shall wear a mask;
  o Clean and disinfect vehicles after each ride;
  o Keep record (day, time, route) of individuals transported in each service.

➢ Accommodation
  o Avoid sharing rooms. If possible, participants should sleep in individual rooms;
  o Avoid social gatherings in common areas;
  o Meeting rooms shall guarantee a safe distance.

➢ Meals
  o Meal shall be served following local health authorities’ guidelines for group meals;
  o A physical distance shall always be observed (e.g. lines, dining tables, etc.);
  o Avoid having meals facing other individuals.
Accreditations
- If plastic printed accreditations are needed, they shall be disinfected and placed in a sealed plastic bag before handing out to each individual or team representative;

Laundry
- For group laundry, organisers shall provide individual laundry bags for each participant;
- Laundry staff shall wear protective mask, gloves and gowns while picking up and dropping off laundry;
- Laundry pick-up areas shall be disinfected appropriately after laundry is taken away.

Media Services:
- Limit/set the amount of accredited media representatives allowed in the venue to ensure social distancing based on available space;
- The media centre should be prepared with at least 2m between each seat and each row of seats;
- Mandatory use of face covering masks when interacting with people;
- A minimum distance of 1 metre should be kept between photographers in photo positions. Available positions must be pre-marked;
- A minimum distance of 2 metres shall always be kept between media representatives and athletes, including in the Mixed Zone. Available positions should be pre-marked;
- The media representatives should go through the same health screening process as the rest of the accredited groups.

Cleaning procedures:
- To establish a cleaning plan, a thorough evaluation of each event venue is needed to identify:
  - Spaces to be used;
  - Type of groups and number of people that may use and/or transit through each space;
  - Frequency and schedule of use/transit by each group;
  - Number of sanitary staff needed.
- Spaces to be regularly cleaned and disinfected include, at minimum, those listed in section 2.4 of this document;
- Specific cleaning instructions shall be developed, and staff instructed accordingly;
➢ General cleaning shall be done with microfibre clothes moistened with soap and water, or with 75% ethyl alcohol sanitizers with subsequent drying;

➢ General cleaning shall take place at least once a day using different cleaning clothes for each type of object/surface (i.e. doors, windows, glass, tables, toilets, sinks, desks, chairs, keyboards, remote controls, printers, etc.);

➢ Frequently touched objects should be disinfected several times throughout the day (i.e. door handles, toilet handles, bathroom faucet handles, light switches, etc.);

➢ Cleaning personnel shall be protected appropriately with face mask and gloves a minimum.

Management of Symptomatic Cases:

➢ Assign sufficient medical personnel on-site including designated medical providers who can refer suspected cases for COVID-19 testing;

➢ Predetermine emergency contacts and exact protocols with local authorities;

➢ Determine how all involved parties will be notified of a confirmed case of a COVID-19 situation;

➢ Establish isolation room in on-site medical treatment clinics/facilities where an individual can be initially assessed;

➢ Determine with the local health authorities where an individual diagnosed with COVID-19 will be cared for and isolated;

➢ Isolate persons who become ill or are suspected to be ill while at the event;

➢ The isolation area should be equipped with the necessary supplies determined by the local authorities;

➢ The medical staff attending symptomatic persons should wear FPP2 masks, rubber/disposable gloves, and glasses or visors, which shall be disposed immediately after use and the staff shall cleanse thoroughly afterwards;

➢ The symptomatic patient should be given a surgical mask before carrying out a careful evaluation;

➢ In the case of a symptomatic patient (Temperature 37.5, sore throat, runny nose, breathing difficulties and flu-like symptoms) based on clinical data, the case should be reported to local health authorities following the pre-established organisational channels, recommending when possible to perform a Covid-19 test;

➢ Medical staff must proceed, immediately after evaluation, with personal and room cleaning protocol as established by the local authorities;
➢ If the subject does not fall within the definition of “case” or “suspect case”, he/she shall be sent home with the indication to contact his/her own physician;

➢ If a staff member falls within the definition of “case” or “suspect case”, it shall be reported immediately to local health authorities following the pre-established organisational channels.

3.4. Competition

Sports activity and life in general have been significantly affected by COVID-19 prevention measures in place across the globe. Although our team sports are moderate in contact, there are several factors that each organiser will need to evaluate. Our traditional ways of competing will need to be greatly altered in many instances to allow us to be back on the field of play while minimising the risk of infection. Below are some competition specific recommendations to be considered.

➢ Pre-Tournament:
  o Any meetings necessary shall respect physical distance;
  o The pre-tournament technical meeting with teams set up shall respect physical distance;
  o Press conferences set up shall respect physical distance;
  o No access of Media representatives to Team zones (i.e. dugout, clubhouse, etc.) should be allowed. Specific interview zones and protocols may be set up on a case by case basis;
  o Officials involved in athlete’s ID control shall wear protective gear and wash hands thoroughly after finishing each team control.

➢ Pre-game:
  o Only one team shall be on the field at a time for warm-ups, BP, and Infield practice;
  o If possible, avoid pre-game ceremonies (i.e. anthems, first pitch ceremonies, etc.);
  o No handshakes, no friendly gift exchange, no autograph signatures;
  o Minimum physical distance of 1-metre at Home Plate meeting;
  o If possible, avoid line-up exchange at home plate.

➢ In-Game
  o No chewing tobacco, seeds or spitting at any time.;
  o Athletes shall not lick their fingers;
  o Minimum physical distance of 1 metre shall always be kept in dugout. If there is not sufficient room, an alternate space may be assigned for non-essential personnel and/or inactive players;
  o Balls:
    ▪ Ball prep (mud rubbing) to be done by one appointed personnel with protective rubber gloves;
    ▪ Use of different set of official balls for home and visitor teams while on defence;
    ▪ Ball in-play taken out for appropriate cleaning/disinfection after play is finished;
    ▪ Ball handlers shall wear protective gloves and apply hand sanitizer every half inning.
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- **Bats:**
  - No bat boys/girls shall be allowed
  - If batter is not able to retrieve his/her own bat, team representative shall pick-up wearing rubber gloves. Team representative shall apply hand sanitizer and/or wash hands upon conclusion of the half inning.

- **Team meetings,** including pitching visits,** should maintain physical distance of minimum 1 metre;**
- **Coaches** may always approach umpire keeping a minimum distance of two metres;
- **Base coaches** must always stay within their box;
- **Bases** shall be cleaned every half inning;
- **Pitchers,** catchers,** and bullpen coach** must always maintain a physical distance of 1 metre.

- **Tournament Officials:**
  - Shall avoid any kind of handshakes / fist bumps between them or while interacting with team representatives;
  - Shall keep physical distance between them and/or while interacting with other event participants;
  - Shall wear mask while in the venue;
  - **Umpires:**
    - Umpires shall wear masks and gloves;
    - If ball is touched, use of hand sanitizer every half inning is recommended;
    - Home Plate Umpire shall avoid coming in contact with catcher;
    - Exclusive Sanitation & Hydration station with personal bottles to be set up near the field.

- **Technical Commissioners:**
  - Shall wear masks and gloves at all times;
  - Should always work from restricted area and maintain physical distances;
  - Shall not share phone or tablet;
  - Tablet shall be thoroughly clean before and after use.

- **Scorers:**
  - Should always work from a restricted area and keep security distance;
  - Shall not share personal phone or tablet;
  - Avoid paper scoring when possible. Prioritize electronic scoring programs as alternative;
  - Scoring tablet shall be thoroughly clean before and after use.
References:

- Considerations for sports federations/sports event organizers when planning mass gatherings in the context of COVID-19: interim guidance
- FAQs on Mass Gatherings and COVID-19 including Sporting Events FAQs
- Key planning recommendations for Mass Gatherings during COVID-19
- Generic Risk Assessment and Mitigation Checklist
- WHO interim guidance on how to use risk assessment and mitigation checklist
- Decision tree flowchart for mass gatherings in context of COVID-19
- Advice on the use of masks in the context of COVID-19
- Covid-19 Infographics

Questions

If you have any questions about this document, please contact WBSC at: wbsc-corona@wbsc.org.
Appendix 1 – How to Handwash

How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HAN DRUB

Duration of the entire procedure: 40-60 seconds

0. Wet hands with water;

1. Apply enough soap to cover all hand surfaces;

2. Rub hands palm to palm;

3. Right palm over left dorsum with interlaced fingers and vice versa;

4. Palm to palm with fingers interlaced;

5. Backs of fingers to opposing palms with fingers interlocked;

6. Rotational rubbing of left thumb clasped in right palm and vice versa;

7. Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;

8. Rinse hands with water;

9. Dry hands thoroughly with a single use towel;

10. Use towel to turn off faucet;

11. Your hands are now safe.

World Health Organization
Patient Safety
A World Alliance for Safer Health Care
SAVE LIVES
Clean Your Hands

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WHO acknowledges the National Centres for Disease Control (NCDs) in particular the assistance of the Infection Control Programme for their active participation in developing this material.

May 2009
Appendix 2 – How to Wear a Medical Mask Safely

**HOW TO WEAR A MEDICAL MASK SAFELY**

**Do’s**

- Wash your hands before touching the mask
- Inspect the mask for tears or holes
- Find the top side, where the metal piece or stiff edge is
- Ensure the colored-side faces outwards
- Place the metal piece or stiff edge over your nose
- Cover your mouth, nose, and chin
- Adjust the mask to your face without leaving gaps on the sides
- Avoid touching the mask
- Remove the mask from behind the ears or head
- Keep the mask away from you and surfaces while removing it
- Discard the mask immediately after use preferably into a closed bin
- Wash your hands after discarding the mask

**Don’ts**

- Do not use a ripped or damp mask
- Do not wear the mask only over mouth or nose
- Do not wear a loose mask
- Do not touch the front of the mask
- Do not remove the mask to talk to someone or do other things that would require touching the mask
- Do not leave your used mask within the reach of others
- Do not re-use the mask

Remember that masks alone cannot protect you from COVID-19. Maintain at least 1 metre distance from others and wash your hands frequently and thoroughly, even while wearing a mask.
Appendix 3 – Pre-Tournament Questionnaire/ Health Declaration Form

<table>
<thead>
<tr>
<th>Date (dd/mm/yyyy)</th>
<th>First Name:</th>
<th>Last Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full Name as shown in the passport and other ID</td>
<td>Number:</td>
<td></td>
</tr>
<tr>
<td>Passport ☐ other ID ☐</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Permanent address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Address during the event, (if it’s hotel, provide name and room number)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Telephone number</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E-mail address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Countries that you visited or stayed in past 14 days</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### History of exposure

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Within the last 14 days, have you had contact with any person who has been tested positive for an infection with the COVID-19?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Have you ever been admitted to or visited a hospital in the past month?</strong></td>
<td></td>
</tr>
<tr>
<td><strong>If yes, please specify the reason for the admission or visit:</strong></td>
<td></td>
</tr>
</tbody>
</table>

### Have you experienced any of the following symptoms during the past 14 days?

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Fever</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Vomiting/Nausea</em></td>
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<td></td>
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<tr>
<td><em>Cough</em></td>
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<td><em>Diarrhea</em></td>
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<tr>
<td>Dyspnea</td>
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<td>Skin hemorrhage</td>
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<td>Sore throat</td>
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<tr>
<td>Rash</td>
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<tr>
<td>Chest Pain</td>
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<tr>
<td>Fatigue/Tiredness</td>
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<tr>
<td>Conjunctivitis</td>
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<tr>
<td>Headache</td>
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<tr>
<td>Myalgia</td>
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<tr>
<td>Loss of taste</td>
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<tr>
<td>Chills</td>
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<tr>
<td>Loss of smell</td>
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</tbody>
</table>

If you answered YES to any and are being treated already, please list which vaccines and/or biologicals are being used:

Please be aware that if you have answered YES to any of the above questions, you should stay at home, inform your Team Manager immediately and follow local public health guidelines.