

Long Hill Baseball & Softball Association – Illness Guidelines & Questionnaire

Participants should not come to the field and participate in a game and/or practice with signs or symptoms of illness (see below) or if they are not able to participate in normal routine game and/or practice activities. We ask for your cooperation, as this is especially important in providing a healthy and safe environment during game and/or practice activities.

To be completed and signed by responsible adult, collected, and held by head coach for every team participant at every game and/or practice. The head coach may be asked to submit this signed document to the Long Hill Baseball & Softball Association upon request.

During the past 24 hours, the participant experienced:

Fever (100.4 F or greater)	Yes	No
Fatigue	Yes	No
Cough	Yes	No
Sneezing	Yes	No
Aches and Pains	Yes	No
Runny/Stuffy Nose	Yes	No
Sore Throat	Yes	No
Diarrhea	Yes	No
Headaches	Yes	No
Shortness of Breath	Yes	No
New loss of taste or smell	Yes	No

COVID-19 Exposure – Any exposure to someone with COVID- 19 or travel to an area of high transmission. (See NJ and CDC Travel Advisories)

Yes No

Participant's Name: _____

Signature of Responsible Adult:

Date:
