Checklist for Novel Coronavirus Prevention

When using Sports Facilities

**Name** (group rep)　　　　 　 　　　 Visit Date: ( )

Day

(YYYY/MM/DD)

**TEL**　　　　　　　　 　　　　 Visit Times　　　　　　　～

**Address**\*　　　　　　　　　 　　　 Facility Name

\*When using the same facility multiple times in a month, the address can be abbreviated.

【Important】

Before using the facility, please go through the checklist below and turn it in. When coming as a group, do the checklist for everyone and write everyone’s information on the back of this sheet. This information will be kept for a month so that users can be contacted in the case an infected person has used this facility recently.

※When filling the checklist out for multiple people, all members must confirm each item and if any do not apply to someone, we ask that that person refrain from using the facility.

|  |  |  |
| --- | --- | --- |
|  | Checklist | Checkboxes |
| １ | I do not have an abnormal body temperature today |  |
| ２ | Answer the following for the period of the last 2 weeks |  |
|  | 1. I have had no fever, cold-like symptoms, loss of sense of taste, or loss of smell
 |  |
|  | 1. I have not had close contact with someone who has tested positive for the novel coronavirus
 |  |
|  | 1. No one I live or closely interact with is suspected to have been infected
 |  |
|  | 1. I have not traveled within the last 14 days from a country or region with travel restrictions and have not had close contact with someone who has such travel history
 |  |

The personal information provided will be used in order to prevent the spread of the novel coronavirus. It will not be used for any other purpose.

(Back)

Today’s Visitors

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | Name | Phone number | No. | Name | Phone number |
| 1 |  |  | 31 |  |  |
| 2 |  |  | 32 |  |  |
| 3 |  |  | 33 |  |  |
| 4 |  |  | 34 |  |  |
| 5 |  |  | 35 |  |  |
| 6 |  |  | 36 |  |  |
| 7 |  |  | 37 |  |  |
| 8 |  |  | 38 |  |  |
| 9 |  |  | 39 |  |  |
| 10 |  |  | 40 |  |  |
| 11 |  |  | 41 |  |  |
| 12 |  |  | 42 |  |  |
| 13 |  |  | 43 |  |  |
| 14 |  |  | 44 |  |  |
| 15 |  |  | 45 |  |  |
| 16 |  |  | 46 |  |  |
| 17 |  |  | 47 |  |  |
| 18 |  |  | 48 |  |  |
| 19 |  |  | 49 |  |  |
| 20 |  |  | 50 |  |  |
| 21 |  |  | 51 |  |  |
| 22 |  |  | 52 |  |  |
| 23 |  |  | 53 |  |  |
| 24 |  |  | 54 |  |  |
| 25 |  |  | 55 |  |  |
| 26 |  |  | 56 |  |  |
| 27 |  |  | 57 |  |  |
| 28 |  |  | 58 |  |  |
| 29 |  |  | 59 |  |  |
| 30 |  |  | 60 |  |  |