

Aquila Club Self Declaration Form

To be completed by all users of the **Aquila Club Leisure Centre** prior to your visit. Please use the email address you have registered with the centre when you place your booking. Please note this is not a booking form. You need to call the centre to secure your session as well as completing this form. Thank you.

Email address * _____

Have you previously completed this form? *

Yes No

Are you a Member? *

Yes No **Membership Number:** _____

Will a child be included in this form? *

(You must be over 18 to complete this form. Thank you.)

Yes No

Child's Name * _____ **Age:** _____

Child's Name * _____ **Age:** _____

Child's Name * _____ **Age:** _____

Personal Information

Full Name * _____

Phone Number * _____

Covid Protocols

You have read and understood the protocols for using our facility on our website/attachment

Yes, I have read and understood

No

Minimising Risk

With reference to COVID-19, you acknowledge and understand the risks involved and your role in minimising that risk *

Yes No

SIGNED: _____

DATE: _____

Covid Question 1

Do you have symptoms of cough, fever, high temperature, sore throat, runny nose, breathlessness or flu like symptoms now or in the past 14 days? *

Yes No

Covid Question 2

Have you been diagnosed with confirmed or suspected Covid-19 infection in the last 14 days? *

Yes No

Covid Question 3

Are you in close contact of a person who is a confirmed or suspected case of Covid-19 in the past 14 days (i.e. less than 2 meters for more than 15 minutes accumulative in 1 day)?

Yes No

Covid Question 4

Have you been advised by a doctor to self-isolate at the time? *

Yes No

Covid Question 5

Have you been advised by a doctor to cocoon at this time? *

Yes No

REMINDER

It is a requirement to advise the Aquila Club should any of the above change? *

Acknowledgement

Aquila Club Leisure Centre is collecting this sensitive personal data for the purposes of maintaining safety within the Centre in light of the COVID-19 pandemic. The legal basis for collection this data is based on vital interest, maintaining occupational health and safety and will be held securely in line with our retention policy & GDPR regulations. Please acknowledge that you have read, understood and accept the above statement.

I accept I do not accept