

## **MIST Health Checklist**

All participants in all 2020 tournaments must complete this checklist. Print it out and bring it with you to registration. Initial each line and sign at the bottom.

I am not currently sick o	r have a fever.	
I have not been sick or ha	ave had a fever in the last 14 day	/s.
I have not traveled to <u>an</u> y	<u>v listed Level 3 nation</u> in the last	14 days.
I am not at a <u>higher risk c</u>	of serious illness due to chronic	medical conditions.
I will follow the "no physi	ical contact" rule. I will not shak	e hands or hug other people.
Participant Signature	- ————————————————————————————————————	 Date
Parent Signature*	Parent Name	 Date
*required if participant is und	er the age of 18	