



NYC Parks

COVID-19 Athletics Safety Plan and Checklist Affirmation

All applicants are required to review and sign this COVID-19 Safety Plan and Checklist Affirmation. Please initial next to each statement to affirm that you understand and will comply. Any support documentation or further plans may be submitted along with this affirmation for review.

Please note: If violations are observed three times for a team, we will revoke permits for the entire league/ organization. Athletic field permits may be further restricted or cancelled based on evolving COVID-related restrictions, and permit holders will be issued a pro rata credit.

Event ID(s): _____	Youth / Adult Permit: _____
Applicant Name: _____	Sport(s): _____
Applicant Phone: _____	Organization Name: _____

PHYSICAL DISTANCING AND FACE COVERINGS

To ensure attendees comply with physical distancing and face covering requirements, you/your organization agree to do the following:

Initials

- _____ Ensure that all activity is consistent with NY State Guidelines, including restrictions on games and/or competitive events/programs.
governor.ny.gov/sites/governor.ny.gov/files/atoms/files/SportsAndRecreationSummaryGuidance.pdf
- _____ Ensure consistent six feet of distance between individuals, unless safety or core activity (e.g. practicing, playing) requires a shorter distance. If a shorter distance is required, individuals must wear face coverings, unless players are unable to medically tolerate such a covering for the physical activity. Coaches, trainers, and/or other individuals who are not directly engaged in activity are required to wear face coverings if they are medically able to do so.
- _____ Limit spectators to two per participant. Spectators must practice physical distancing unless they are with members of their household or close social contacts.
- _____ Prohibit congregation once games conclude. All participants, coaches, volunteers and spectators must leave the field of play immediately and remain distanced from incoming teams.
- _____ Ensure the proper disposal of face coverings and PPE. All trash and recyclables must be removed from Parks property.

HYGIENE

To ensure attendees can practice proper hygiene, you/your organization agree to adhere to hygiene and sanitation requirements from the Centers for Disease Control and Prevention (CDC) and Department of Health (DOH), and do the following:

- _____ Provide alcohol-based hand sanitizer for volunteers, staff, coaches, spectators, and players where handwashing is not feasible.
- _____ Regularly clean and disinfect common areas and shared surfaces.
- _____ Limit the sharing of objects and discourage touching of shared surfaces; or, when in contact with shared objects or frequently touched areas, wear gloves, sanitize and/or wash hands before and after contact.

TEST AND TRACE

To aid in test and trace efforts, you/your organization agree to do the following:

Initials

_____ Maintain a log of participants and contact information for your records to aid in test and trace efforts as necessary.

_____ If an attendee tests positive for COVID-19 after your activity; event organizer must cooperate with all contact tracing efforts, including notification of the NYC Health Department and Test and Trace in order to notify potential contacts who had close contact with the individual, while maintaining confidentiality required by state and federal law and regulations.

_____ Have a plan for contact tracing in the event of a positive case.

- i. In case an employee, volunteer and/or attendee tests positive for COVID-19, how will you trace close contacts? How will close contacts be informed that they may have been exposed to COVID- 19?

HEALTH SCREENING

To ensure the league/activity organizer and employees and/or volunteers comply with requirements set by the NY State Department of Health, you/your organization agree to do the following:

_____ Implement the mandatory health screening assessment below for employees and/or volunteers prior to the event. In addition, you/your organization must ask participants to complete this health screening as well. Responses must be reviewed and documented.

Prior to the event, you/your organization must be notified of:

- (1) COVID- 19 symptoms in past 14 days, which may include a fever of 100.4 degrees Fahrenheit or greater, a new cough, new loss of taste/smell, shortness of breath or difficulty breathing, muscle/body aches, fatigue, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea),
- (2) A positive COVID-19 test in the past 14 days, measured from the test date, not the date that the test result was received
- (3) close contact (within six feet or less for at least 10 minutes) with confirmed or suspected COVID-19 case in past 14 days, and/or
- (4) travel out of the state or country within the last 14 days.

_____ Prohibit any employee, volunteer, or participant from entering the activity space who have indicated “yes” to any of the aforementioned questions in the mandatory health screening assessment above.

_____ Designate a site safety monitor whose responsibilities include continuous compliance with all aspects of the site safety plan.

I have read and will comply with all guidelines and safety measures outlined above. I understand that tournaments are prohibited. I understand that NYC Parks reserves the right to request a more detailed safety plan, should they deem one necessary based on the details of my permit request. I understand that failure to comply with the NYS Guidelines for Sports and Recreation as well as the above conditions could result in revocation of my athletic permit. I agree to comply with zone-related restrictions as they arise, should the location of my permit fall into a red, orange, or yellow zone.

Signature: _____

Date: _____