Sunbelt 2021 Team Temp Checks Form

Please bring this form to the check-in tent/trailer, 30 minutes before your first game, each day, so that Rangers Staff can take and document your player and coach temperatures. Thank You!

Team Name and Coach:		
Date:		

Circle Yes or No

Player Name/ Coach Name	**Phone #**	**Symptoms of COVID** Do you have any of the following: Fever of Chills, Cough, Shortness of Breath, Muschle or Body Aches, Loss of Taste or Smell or Headache?	**Temperature**
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	
		YES NO	