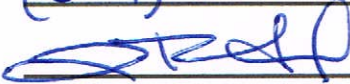


Organization Name: White Rock South Surrey Baseball Association
 Sport Played: Baseball
 Contact Person: Jordan Broatch
 Title within Organization: Director of Program Development
 Contact Number: (604) 897-6607
 Signature: 
 Date Signed: June 12 / 2020

CHECKLIST FOR SPORT ACTIVITES RESUMING JUNE 15TH

Please check the boxes below to confirm that the required criteria in each section is included within your 'Return to Sport' plan.

PARTICIPANTS	Activities are community focused - taking place within the home sport community or clubs where participants are members. <input checked="" type="checkbox"/> In-club activities only
TRAINING & PRACTISES	Modified training & practise sessions <u>may</u> begin where: (please check to confirm that the required criteria below is included in your Return to Sport plan): <input checked="" type="checkbox"/> Full physical distancing (2m) is maintained between participants <input checked="" type="checkbox"/> A maximum of 50 participants per field (this includes staff, volunteers, players) <input checked="" type="checkbox"/> No spectators <input checked="" type="checkbox"/> No close contact and/or contact activities permitted <input checked="" type="checkbox"/> All activities are modified for individuals <input checked="" type="checkbox"/> No sharing of equipment <input checked="" type="checkbox"/> No cross-regional travel
GAMES	NO GAMES/COMPETITIONS MAY OCCUR - PRACTISE/TRAINING BASED ACTIVITES ONLY
INSURANCE	<input checked="" type="checkbox"/> If you have a PSO - have they sanctioned your planned activities to resume as of June 15th? <input type="checkbox"/> If you have a NSO - have they sanctioned your planned activities to resume as of June 15th? <input checked="" type="checkbox"/> Do you have valid insurance with a Covid-19 exclusion clause? <input checked="" type="checkbox"/> Do you have valid insurance that covers Covid-related issues?
RETURN TO SPORT PLAN	<input checked="" type="checkbox"/> Will you be following the approved 'Return to Sport' plan from your PSO? <input checked="" type="checkbox"/> Have you adapted/customized an approved 'Return to Sport' plan from your PSO to best fit your organization? <input type="checkbox"/> If you do not have a PSO, will you be following a sport-specific 'Return to Sport' plan from viaSport? <input type="checkbox"/> If you do not have a PSO, have you developed a 'Return to Sport' plan based on viaSport's guidelines?