PRE-EVENT MEDICAL SCREENING CHECKLIST

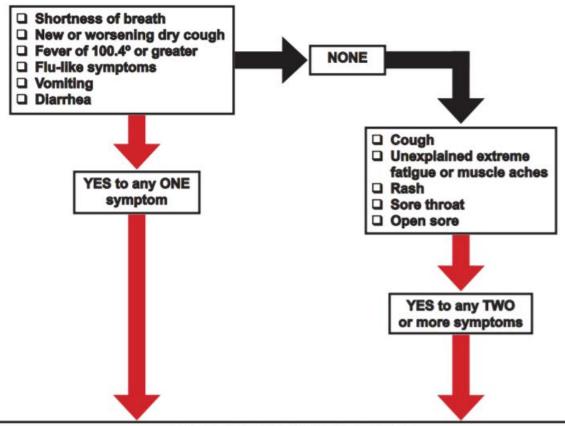
The intent of this checklist is to review with each youth and adult participant their current health status on arrival at the camp/event. Anyone entering a camp on any day will need a copy of this checklist completed and signed. If the participant is a minor, a parent signature is required.

☐ Yes
 ☐ No
 Have you been in contact with anyone who has COVID-19 or is otherwise sick?
 ☐ Yes
 ☐ No
 Have you or anyone you have been in close contact with traveled on a cruise ship, internationally, or to an area with a known communicable disease outbreak in the last 14 days?

If the answer is "yes" to either of these questions, the participant must stay home.

☐ Yes ☐ No Are you in a higher-risk category as defined by the CDC guidelines?
If the answer is "yes" to this question, we recommend that you stay home. Should you choose to participate, you must have approval from your healthcare provider and then proceed to the symptom decision tree below.

If the above answers are "no," proceed to this symptom decision tree.



THE PARTICIPANT MUST STAY HOME

These symptoms are associated with communicable diseases and the participant MUST stay home until medically cleared by their health care provider.

Camper Printed Name:	
Camper Signature:	Date:
Parent Signature:	Date:

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