



Camper Arrival Day Screening

All camp participants must complete this form within 24 hours prior to arrival at camp. Print out the completed form and bring it with you to camp check-in or to bus check-in on the first day.

Participant First Name _____ Participant Last Name _____

Session Attending _____ Vaccination Status, Up-to-date? Yes _____ No _____

All participants are required to have a negative COVID-19 test result from a test administered 48 hours or less prior to arrival at camp and be able to provide proof of their result (ie. a picture of the test result). An at home antigen test is fine. Please confirm your test result.

Negative Positive

Explain any "Positive" answer below

In the past 10 days, has the participant been diagnosed with or been exposed to a COVID-19 case?

Yes No

Explain any "Yes" answer below

In the past 72 hours, has the participant experienced any of the following symptoms:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache/stomachache/nausea
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Multiple episodes of vomiting or diarrhea

Yes No

Explain any "Yes" answer below

ONLY for those not up-to-date on vaccinations: has the participant limited interactions with larger groups for 10 days prior to their arrival at camp, especially indoors, and especially if anyone in those larger groups may be unvaccinated?

Yes No NA

Explain any "No" answer below

I understand the inherent risks in attending camp during a public health crisis.

Yes No

Explain any "No" answer below

Please explain any answers as necessary: _____

I affirm that the information submitted on this form is correct and accurately reflects the health status of the participant.

Signature of Parent/Guardian or Adult Staff
Completing the Form