

## Wisconsin Lions Camp Pre-Camp Health Screening 2021

Camper Name: \_\_\_\_\_ Session: DHH Adults August 16-20, 2021

The best Camp sessions start with healthy campers and this begins at home. In an effort to minimize illness at Camp this summer, you have two options regardless if you have been vaccinated for Covid-19.

- Option 1: You will take a Covid-19 PCR test up to 72 hours prior to arrival. You must bring a paper copy of the negative Covid-19 results to Camp on August 16, 2021.
- Option 2: You will self-screen for 14 days prior to your arrival at Camp. You must bring this completed for to Camp on August 16, 2021.

**Please indicate if you have any of the following symptoms prior to Camp and record a temperature daily. If any temperature or symptoms are present, please be evaluated by a licensed provider and contact Camp for further guidance.**

**Symptoms:**

- |   |                              |            |
|---|------------------------------|------------|
| • Cough                                       | • Muscle Pain                | • Vomiting |
| • Shortness of breath or difficulty breathing | • Sore throat                | • Diarrhea |
| • Fever                                       | • New loss of taste or smell |            |
| • Chills                                      | • Nausea                     |            |

Day:	Tuesday, August 3	Wednesday, August 4	Thursday, August 5	Friday, August 6	Saturday, August 7	Sunday, August 8	Monday, August 9
Temperature/ Symptoms							
Day:	Tuesday, August 10	Wednesday, August 11	Thursday, August 12	Friday, August 13	Saturday, August 14	Sunday, August 15	Monday, August 16
Temperature/ Symptoms							

Please initial

- |   |               |
|---|---------------|
| 1. I have not been around anyone with any of the listed symptoms or diagnosis of COVID-19 since August 3, 2021. | Initial _____ |
| 2. No one in my household has been sick since August 3, 2021.   | Initial _____ |
| 3. I have not traveled by air or traveled out of WI since August 3, 2021.                                       | Initial _____ |

*My signature indicates that I completed this health screening daily since August 3, 2021 and to the best of my ability. I understand that arriving to Camp healthy is vital to a healthy Camp for all campers and staff.*

Camper Signature: \_\_\_\_\_

Date: \_\_\_\_\_