

## Wisconsin Lions Camp Pre-Camp Health Screening 2021

Camper Name: \_\_\_\_\_

Session: DHH2 August 1-5, 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 your camper has been vaccinated for Covid-19.

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

**Please indicate if your camper has any of the following symptoms prior to Camp and record a temperature daily. If any temperature or symptoms are present, please have your camper 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:	Monday, July 19	Tuesday, July 20	Wednesday, July 21	Thursday, July 22	Friday, July 23	Saturday, July 24	Sunday, July 25
<i>Temperature/ Symptoms</i>							
Day:	Monday, July 26	Tuesday, July 27	Wednesday, July 28	Thursday, July 29	Friday, July 30	Saturday, July 31	Sunday, August 1
<i>Temperature/ Symptoms</i>							

Please initial

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

*My signature indicates that we completed this health screening daily since July 19, 2021 and to the best of our ability. We understand that arriving to Camp healthy is vital to a healthy Camp for all campers and staff.*

Parent/Guardian Signature: \_\_\_\_\_

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