

Wisconsin Lions Camp Pre-Camp Health Screening 2021

Camper Name: _____

Session: Diabetes 2 July 18-22, 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 July 18, 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 July 18, 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 4	Tuesday, July 5	Wednesday, July 6	Thursday, July 7	Friday, July 8	Saturday, July 9	Sunday, July 11
Temperature/ Symptoms							
Day:	Monday, July 12	Tuesday, July 13	Wednesday, July 14	Thursday, July 15	Friday, July 16	Saturday, July 17	Sunday, July 18
Temperature/ Symptoms							

Please initial

- | | |
|--|---------------|
| 1. My camper has not been around anyone with any of the listed symptoms or diagnosis of COVID-19 since July 4, 2021. | Initial _____ |
| 2. No one in our household has been sick since July 4, 2021. | Initial _____ |
| 3. My camper has not traveled by air or traveled out of WI since July 4, 2021. | Initial _____ |

My signature indicates that we completed this health screening daily since July 4, 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: _____