

## Pre-Camp Health Screening

Camper Name:	
Camp Dates:	

## Location (circle): Betsy-Jeff Penn Eastern 4-H Center Millstone 4-H Camp

Dear Camp Families:

In an effort to minimize illness at camp we ask that you check on the health of your camper daily beginning 14 days prior to camp. The best camp sessions start with healthy campers and this begins at home. Please bring this completed form to camp on opening day.

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 (Symp):

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

## Please initial

1. My child has not been around anyone with any of the listed symptoms or diagnosis of COVID19 in the 14 days before the start of camp. Initial

- 2. No one in our household has shown any of the above symptoms in the 14 days prior to camp. Initial \_\_\_\_\_
- 3. My child has not traveled by air or traveled out of state in the 14 days prior to camp. Initial \_\_\_\_\_\_
- 4. My child has adhered to our state's guidelines regarding COVID19. Initial
- 5. My camper has tested negative for COVID-19 within 72 hours of camp. Initial

Day:	14	13	12	11	10	9	8
Day: Temp/Sym							
р							
Day:	7	6	5	4	3	2	1
Day: Temp/Sym							
р							

Start date of temperature/symptom screening:

Our signature indicates that we completed this health screening daily for 14 days prior to camp and to the best of our ability. We understand that arriving to camp healthy is vital to a healthy camp for all campers.

We understand that failure to complete and submit this form at camp check in or symptoms listed above or temperature readings at or above 100.4 will result in the camper not being permitted to attend camp.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

Camper Signature:

created by Eleanor Matthews. RN 2020 source: https://campnurse.org/wp-content/uploads/2020/05/Pre-Camp-Health-Screening-51420.pdf