



LCC Pre-Camp Health Screening COVID-19

Camper name: _____ Kirchenwald / Nawakwa
(Circle One)

Program name: _____

Dates of Program: _____

In an effort to promote a healthy camp community, all campers must take a daily record of their health, beginning 14 days prior to arrival at camp. Complete this form and return it to camp at check-in at the start of your week. While a health record for *other members* of the camper household is not required, it is **strongly advised** that the health of all household members be monitored during this time.

Use the chart below to record daily temperature readings and presence of symptoms. Symptoms of COVID-19, which should be indicated, include:

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

Start date of Pre-Camp Health
Screening: ____ / ____ / ____

Days Until Camp	14	13	12	11	10	9	8
Temperature							
Symptoms							
Days Until Camp	7	6	5	4	3	2	1
Temperature							
Symptoms							

If your camper records temperatures above 100 degree and/or presents COVID-19 symptoms, please have them evaluated by a licensed provider and contact camp for further guidance.

The following questions are for the purpose of SCREENING and are not EXCLUSIONARY.

1. Has the camper been around anyone presenting any of the listed symptoms or anyone diagnosed with COVID-19 in the 14 days prior to arrival at camp?
Yes_____ No_____
2. Has anyone in the camper's household been sick in the 14 days prior to arrival at camp?
Yes_____ No_____
3. Has the camper traveled by air or out of state in the 14 days prior to arrival at camp?
Yes_____ No_____
4. Has the camper adhered to Pennsylvania state guidelines regarding COVID-19?
Yes_____ No_____
5. Is the camper vaccinated for COVID-19?
Yes_____ No_____
6. Does the camper have evidence of a negative COVID-19 test in the 3 days prior to arrival at camp?
Yes_____ No_____

Camper Signature: _____ Date: _____

Parent Signature: _____ Date: _____