

# Kenwal Day Camp

## (COVID-19) Attestation Form

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

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

Staff Member Name: \_\_\_\_\_

In line with the recent Covid-19 updates, Kenwal Day Camp is taking proactive measures to prevent exposure at camp. Please complete the following for you/your child. Return this to the office prior to June 24<sup>th</sup>, 2021.

**I declare I will take my/my child's temperature daily prior to sending him/her to camp. Should my child have any of the following symptoms within the last day, that are not caused by another condition, I will not send my child to camp and will notify the camp of the reasons why.**

1. *Fever (100.4 degrees or higher), cough, shortness of breath, unusual fatigue, muscle/body aches, headache, recent loss of taste/smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea*

2. Has been in close contact with anyone with confirmed COVID-19?

3. Has had a positive COVID-19 test for active virus in the past 10 days, or is awaiting results of a COVID-19 test? *If someone is waiting on a test result simply because of asymptomatic, employment, or outgoing travel preparation testing, they do not need to quarantine while waiting for test results.*

4. Has not been told by a public health or medical professional to self-monitor, self-isolate or self-quarantine because of concerns about COVID-19 infection?

This checklist is provided to help families assess their exposure and limit the risk of spreading the COVID-19 virus. This is not intended to be an exhaustive list of symptoms or exposures, but to assist in self-declaring one's willingness and ability to protect everyone in our camp community.

Should it be discovered that my child has taken fever reducing medication (eg: Tylenol) to attend camp, I understand we will no longer be able to attend, now or in the future, and will forfeit the full tuition paid.

**Circle One:** Staff / Parent / Guardian

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

Print Your Name: \_\_\_\_\_