

Lake Tomahawk Christian Retreat Center COVID-19 Pre-screening Record:

Required for all Guests (Adult & Student)

Camper's Name: _____

(Campers are anyone on campus whether an Adult or Student)

Parent's Name: _____

Parent's Cell Phone: _____

Church Registration Team ONLY:

Showing Symptoms: Yes No

Current Temperature: _____

Time: _____ Date: _____

Signature of Screener: _____

1. Have you been in contact with any person in the last 14 days known to have contracted COVID-19?

Yes No

2. Check any of the following symptoms you have had in the last two weeks?

- | | |
|---|---|
| <input type="checkbox"/> Cough | <input type="checkbox"/> Repeated shaking with chills |
| <input type="checkbox"/> Diarrhea | <input type="checkbox"/> Nasal Congestion/ Runny Nose |
| <input type="checkbox"/> Nausea | <input type="checkbox"/> Unexpected muscle pain |
| <input type="checkbox"/> Vomiting | <input type="checkbox"/> Loss of Taste and/or Smell |
| <input type="checkbox"/> Sore Throat | <input type="checkbox"/> Headache |
| <input type="checkbox"/> Body Aches | |
| <input type="checkbox"/> Shortness of breath, Chest Tightness or difficulty breathing | |
| <input type="checkbox"/> Running a fever (or measuring a temperature of 100.0 degrees Fahrenheit or more) | |

Please specify if you have any pre-existing medical conditions that could be mistaken for any COVID-19 symptoms checked above: _____

If you checked yes in box 1 or checked any symptoms in box 2 and do not have any pre-existing conditions that could be mistaken for COVID-19 symptoms, you will not be allowed to attend camp.

3. Do you have any of the Pre-Existing Illnesses below: (check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Cardiovascular Disease | <input type="checkbox"/> Diabetes |
| <input type="checkbox"/> Respiratory Disease including Asthma | <input type="checkbox"/> Immunocompromised |

4. Have you had the COVID-19 Vaccine? Yes No

PARENT SIGNATURE _____ DATE: _____

*Please be advised of the enhanced risks of campers being in direct contact with anyone 65 or older for 14 days after the end of the camp session.