



PARTICIPANT HEALTH SCREENING

All participants, visitors, vendors, youth and adult, must use this checklist to screen for potentially communicable diseases. This checklist must be completed before departure on the day of the event and will be reviewed upon arrival.

Part I: Higher Risk for Serious Illness

Are you in a higher – risk category* as defined by CDC Guidelines? If so, we recommend that you stay home unless you have the approval of your healthcare provider.

The CDC describes those at higher risk for severe illness from Covid-19 as those who are/have:

- 65 YEARS OLD OR OLDER
- Obesity (BMI of 30 or higher)
- Smoker
- Breathing issues (asthma, cystic fibrosis, lung disease)
- Circulation issues (high blood pressure, coronary disease, stroke, heart abnormalities etc.)
- Diabetes
- Uncommon conditions such as sickle cell anemia, HIC infection or a blood disorder
- Immunosuppression due to chemotherapy or a transplant
- Chronic Kidney or liver disease
- Medically complex conditions

Part II: Recent Interactions

YES ___ NO ___ Do you have Covid-19 or are you currently awaiting results of a Covid-19 test?

YES ___ NO ___ Have you been in contact with anyone who has Covid or is ill but has not been tested in the last 14 days?

YES ___ NO ___ Have you/anyone you have been in contact with been in close contact with, reside, work or travel in an area with large outbreaks in the last 14 days?

YES ___ NO ___ Are you or anyone you have been in close contact with under the current advisement by public health to quarantine or self-isolate?

IF YOU ANSWERED YES TO ANY OF THESE QUESTIONS, YOU MUST STAY HOME!

Part III: Health Screening

Do you have any of the following symptoms which are related to a new illness and can not be attributed to another health condition? (circle any symptoms you have)

Fevers or Chills Cough Loss of taste or smell Headache Shortness of breath Nausea or Vomiting

NAME: _____ Unit # _____

Today's Date: _____ Temperature: _____ (CDC Defines a fever as 100.4F or higher)