



Summer Camp at Armonk Tennis Club

COVID-19 Daily Screening



All campers are required to self-monitor with the assistance of parents/guardians for symptoms of COVID-19, and to **return this form each morning at arrival**. Symptoms to be aware of include:

- Fever of 100.4°F or greater
- Chills
- Cough
- Shortness of breath
- Fatigue
- Muscle or body aches
- Headache
- Loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

It should also be determined whether the camper has traveled domestically or internationally, or been in close contact with a person who has been diagnosed with, tested for, or quarantined as a result of COVID-19.

ACKNOWLEDGEMENT OF DAILY SCREENING

I, the camper's parent and/or legal guardian, affirm that the individual has been monitored for the above symptoms of COVID-19 and has shown no symptoms. I also affirm that the individual has not traveled or been in contact with anyone suspected of carrying COVID-19.

Current Camp Week:

- Jun 29-Jul 2 Jul 6-9 Jul 13-16 Jul 20-23 Jul 27-30 Aug 3-6 Aug 10-13 Aug 17-20

Current Camp Day:

- Monday Tuesday Wednesday Thursday Friday

Printed Name of Camper: _____ Birthdate: _____

Printed Name of Parent/Guardian Dropping Off Camper: _____

Signature of Parent/Guardian: _____ Date: _____

CAMPER TEMPERATURE

To be recorded by camp staff.

_____ ° F

