



## YMCA CAMP CONRAD WEISER 10 DAY HEALTH LOG



Please fill this out for your Camper and present at Check-in

**NAME OF CAMPER** \_\_\_\_\_

**NAME OF PARENT FILLING OUT LOG** \_\_\_\_\_

**CAMPER SESSION** \_\_\_\_\_

A COVID-19 symptom tracking log is recommended to monitor the health and well-being of the waiver participant. A waiver participant with a fever of 100.4°F or greater should consult their primary care physician before hands on care is performed. The log should be completed daily.

Date	Temp	Cough (Y/N)	Sore Throat (Y/N)	Shortness of Breath (Y/N)	Exposure to Someone with Covid (Y/N)

By signing this completed form, I attest that my Camper has followed CDC guidelines in regard to mask wearing in public and has avoided large events, concerts, and festivals. I also attest that I have accurately completed this health log and have taken my Camper's temperature.

Signature of Parent or Guardian \_\_\_\_\_