



## COVID-19 Screening Questionnaire & Release of Liability

Participant: \_\_\_\_\_ Date of birth: \_\_\_\_\_

- Child (< 18 years old)
- Adult (>17 years old)

### Screening Questionnaire

Coronavirus Disease (COVID-19) has been reported in every state and in countries around the world. COVID-19 can cause respiratory and gastrointestinal illness. In order to protect you and others, Pettijohn Springs Christian Camp (PSCC) is asking you about symptoms and exposure to known or suspected COVID-19 cases. Your health is our priority, so please answer the following questions completely and truthfully.

Do you currently have, or have you had in the past 14 days, any of the following COVID-19 symptoms:

- Yes  No      Fever of 100.4°F/38°C?
- Yes  No      Chills or shaking?
- Yes  No      Cough?
- Yes  No      Sore throat?
- Yes  No      Congestion or runny nose?
- Yes  No      Fatigue
- Yes  No      Shortness of breath or difficulty breathing?
- Yes  No      Muscle aches and pains?
- Yes  No      Nausea, vomiting or diarrhea?
- Yes  No      Loss of taste or smell?

In the past 14 days, have you or anyone in your household:

- Yes  No      Traveled internationally or domestically?
- Yes  No      Been diagnosed, tested, or quarantined for COVID-19?

Who was tested? \_\_\_\_\_ Results:  Negative  Positive

- Yes  No      Been in close contact with someone diagnosed or suspected of COVID-19?

(continued on other side)

Release of Liability

Assumption of Risk

The undersigned acknowledges that Novel Coronavirus (COVID-19) infections have been confirmed throughout the United States and the World, including many cases throughout the State of Oklahoma. These have resulted in many cases of quarantine, serious illness, disability and/or death. Although Pettijohn Springs Christian Camp (PSCC) has taken steps consistent with recommendations published by the Centers for Disease Control and Prevention (CDC) and the Oklahoma Department of Health for slowing the transmission of COVID-19, the undersigned fully understands and appreciates both the known and potential dangers of utilizing the facilities, services and programs of Pettijohn Springs Christian Camp and acknowledges that the use thereof by the undersigned and/or such participating children may, despite PSCC's reasonable efforts to mitigate such dangers, result in exposure to COVID-19, which could result in quarantine, serious illness, disability and/or death. Furthermore, the undersigned, on his or her behalf and on behalf of such participating children, hereby agrees to assume all risks of participation and to indemnify and save and hold harmless PSCC, its directors, officers, employees, volunteers and agents from any loss, liability, damages or cost they may incur in the event the undersigned or such participating children suffer illness, injury, or death as a result of contracting COVID-19.

Affirmation of Health

In accordance with the most recent guidelines of the Centers for Disease Control and Prevention (CDC) and the Oklahoma Department of Health for slowing the transmission of COVID-19, the undersigned hereby agrees, represents and warrants that neither the undersigned or the participating children are attending events at Pettijohn Springs Christian Camp (PSCC) within 14 days of (1) experiencing any of the symptoms indicated on Page 1 of this document, (2) traveling internationally or domestically to a COVID-19 "hotspot", or (3) being exposed to others with confirmed or suspected cases of COVID-19.

Agreement for Removal

In the event the Child/Adult (participant) named above (1) experiences one or more symptoms of COVID-19, (2) has extended exposure to someone with COVID-19 symptoms, or (3) the Camp Director and/or Camp Nursing Staff believes it is prudent to remove the participant because of potential exposure to/from others, the undersigned will remove himself/herself or such participating children from the PSCC campus as soon as possible.

I have read and understand the terms of this Release of Liability and agree to its terms.

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

On behalf of:  Myself (Adult, 18 years old or older)  My child (under 18 years of age)