## PRD Participant Health Screening 2021

The number one priority is SAFETY in all PRD programs. You, or your child(ren) attending a PRD program, must complete the following health screening each day prior to camp entry.

PRD Contact Information: Email: <a href="mailto:prd@piedmont.ca.gov">prd@piedmont.ca.gov</a>   Phone: (510) 420-3070	
Participant Name (First and Last):	
Program/Camp Name:	
Exposure Check	
Within the last 10 days, has your child been diagnosed the virus?	d with COVID-19 or had a test confirming they have
☐ No ☐ Yes	
Does your child live in the same household or have th last 10 days, has been diagnosed for COVID-19 or ha	
☐ No ☐ Yes	
<b>Symptom Check:</b> Symptoms need to be new or differ pre-existing diagnosis.	rent symptoms than usual and not explained by a
• Fever (100.4°F/38°C) or Chills	Children report food "tastes bad" or "tastes funny"
• Cough	Sore throat
Shortness of breath or difficulty breathing  Fatigue	Congestion or runny nose
	Nausea or vomiting
Muscle/Body aches	· ·
Severe Headache	Diarrhea     Sooms sick or like they are starting to get sick
New loss of taste or smell	Seems sick or like they are starting to get sick
In the LAST 24 HOURS, has your child had any of the	above symptoms of illness?
☐ No ☐ Yes	

## THANK YOU FOR COMPLETING THIS FORM

## If you answered NO to all questions:

Please proceed with camp admittance/check-in

## If you answered YES to any questions:

- 1) Do NOT enter program area and keep your child at home
- 2) Contact PRD to report your child's absence from camp. PRD staff will follow up with health/safety information and next steps on your child's return to programs.

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