

Rawhide Ranch Summer Camp 2021

7-day Covid-19 Self-Assessment

Please take the temperature of your camper each day and enter the results below. Also, make notes as to Covid 19 symptoms which are listed below. Bring this to camp for check-in.

For the safety of other campers and the entire Rawhide Ranch staff, we are asking that your camper observes a modified quarantine to include limited indoor mixing and total avoidance of unmasked **close contact** with anyone outside of the immediate household for the 7 days of this assessment.

Camper's FULL NAME (Please Print): _____

Parent/Guardian Signature: _____

Day 1 / Date _____ Temperature _____ Symptoms? _____

Day 2 / Date _____ Temp _____ Symptoms? _____

Day 3 / Date _____ Temp _____ Symptoms? _____

Day 4 / Date _____ Temp _____ Symptoms? _____

Day 5 / Date _____ Temp _____ Symptoms? _____

Day 6 / Date _____ Temp _____ Symptoms? _____

Day BEFORE Camp Temp _____ Symptoms? _____

The CDC defines Covid 19 Symptoms as: Fever (100.4 or higher) or chills, Cough, Shortness of breath or difficulty breathing, Fatigue, Muscle or body aches, Headache, New loss of taste or smell, Sore throat. Congestion or runny nose, Nausea or vomiting, or Diarrhea.