

Camp Decorah - 2021 - Pre-Event Health Checklist							
Form should be completed and brought with to check-in.							
Pre-Event Health Checklist is <u>required</u> for all Campers & Adults							
Name:							
Unit:							
	DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6	DAY 7
Answer Y/N							
Fever 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							
Diarrhea							
Have you been a close contact?							
	DAY 8	DAY 9	DAY 10	DAY 11	DAY 12	DAY 13	DAY 14
Answer Y/N							
Fever 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							
Diarrhea							
Have you been a close contact?							