

PARENT & CHILD

HEALTH ASSESTMENT QUESTIONNAIRE

*Sportivun Staff will ask all parents and children before they attend camp each morning. Any answers that may coincide with ill health will be immediately brought to the attention of management and the parent/child will be denied access of camp.

- Have you or your child(ren) been within 1.5m of a person with COVID-19 in the last 14 days?
- Have you or your child(ren) travelled to any country categorized as “Orange” or “Red” in the last 14 days?
- Has there been any positive COVID19 cases in your child(ren)’s school/camp in the last 14 days?
- In the last 48 hours, have you had any of the following symptoms:
 - Fever of 37.8 C (100 F) or above or fever symptoms like alternating chills and sweating
 - **Cough**
 - Trouble breathing, shortness of breath or severe wheezing
 - Chills or repeated shaking with chills
 - Muscle aches
 - Sore throat
 - Loss of smell or taste, change in taste
 - Nausea or vomiting
 - Diarrhea
 - Headache

***If you have answered YES to any of the above, please contact:**

informatie@sportivun.nl