

ATLANTA AREA COUNCIL PRE-CAMP HEALTH STATUS QUESTIONNAIRE

UNIT INFORMATION

Date: _____ Unit Type/Number: _____ Home Council: _____

Leader Name (who completed the form): _____

INSTRUCTIONS

Prior to attending camp, we request that each unit leader review/ask the following questions with all of your unit adults and youth. We request that you do this prior to departing your home location. We will review this procedure upon arrival at camp.

Ask the following questions, does this apply to anyone in your unit?

Condition	Yes	No
Fever (100°F or greater)		
Sore Throat		
Vomiting		
Diarrhea		
Cough		
Muscle Aches or Lethargy		

NOTES

Leaders (to the best of their ability) will be asked to verify the Health Forms and Histories have been reviewed and all medications accurately listed. Be prepared to turn in the Pre-Camp Health Assessment upon arrival at camp.

If an individual in the unit checked "yes" for fever or vomiting or diarrhea alone OR to any two (or more) of the other symptoms, do not allow that individual to travel to camp. If they have questions about the individual's health or symptoms, contact their healthcare provider.

If any individual has been diagnosed by a healthcare provider with a different disease – such as strep – have them follow their healthcare provider's recommendation. Scout Camps are adventurous, active and frequently wilderness environments. There is no provision for lodging other than in a un-air conditioned tent. Please assure the health and safety of all of our campers by assuring that only Scouts and Scouters who are healthy come to camp.