

CAMP LONG LAKE

BSA Pre-Event Medical Screening Checklist

This is a tool to assist participants in identifying potentially communicable diseases in advance of event participation. The intent of this checklist is to review with each participant their current health status both before departure and upon arrival at the event.

*Name: _____ Date: _____

Pack/Troop: _____ Event: _____

Has the participant had any of the following symptoms in the past 24 hours? (check all that apply):

- | | |
|--|--------------------------------------|
| <input type="checkbox"/> Fever (100.4° F or greater) | <input type="checkbox"/> Fatigue |
| <input type="checkbox"/> Vomiting | <input type="checkbox"/> Cough |
| <input type="checkbox"/> Diarrhea | <input type="checkbox"/> Sore Throat |
| <input type="checkbox"/> Rash | <input type="checkbox"/> Open Sore |
| <input type="checkbox"/> Muscle Aches | <input type="checkbox"/> None |
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If the participant has any of these symptoms – **he or she must stay home.**

Be responsible for your health and that of others. Isolate if you are sick. Do not attend any activity/meeting/event if you, anyone you live with or anyone you have recently been around feel unwell.

Participants who are symptomatic or ill should not attend or return to an activity until cleared by their health care provider.

*I have read and understand all the release of assume risk and waive my right concerning liability as described.

Camp reserves the right to turn away anyone who poses a risk by exhibiting any symptoms.



Camp Long Lake

Assumption of the Risk and Waiver of Lawsuit/Liability

Camp Long Lake (“Camp”) has put in place preventative measures to reduce the spread of communicable diseases; however, Camp cannot guarantee that you or your child(ren) will not become infected. Camp cannot prevent you or your child(ren) from becoming exposed to, contracting, while attending at Camp. It is not possible to prevent against the presence of communicable diseases. Therefore, if you or your child(ren) choose to utilize Camp’s services and/or enter onto Camp’s property you may be exposing yourself or your child(ren) and you will be increasing your risk and your child(ren)’s risk of contracting communicable diseases.

ASSUMPTION OF RISK: I have read and understood the above warning. I acknowledge and hereby choose to assume and accept the risk for myself and/or my child(ren) in order to utilize Camp’s services and enter on Camp’s property. These services are of such value to me and/or to my child(ren), that I accept the risk of being exposed to and/or, contracting, in order to utilize Camp’s services and property in person. I understand that I and/or my child(ren) do not need to attend Camp, it is completely voluntary, and I and/or my child(ren) can choose to not attend if we desire. I understand that the risk of becoming exposed to or infected at Camp may result from the actions, omissions, or negligence of myself, my child(ren), and others, including, but not limited to, Camp employees, volunteers, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my or my child(ren)’s attendance at Camp or participation in Camp programming (“Claims”).

WAIVER OF LAWSUIT/LIABILITY: On my behalf, and on behalf of my children, I hereby forever release and waive my right to bring suit against Camp and its owner the Potawatomi Area Council, and the Camp’s and Council’s officers, directors, managers, officials, trustees, insurers, agents, employees, or other representatives in connection with exposure, infection, and/or spread caused by or in any way related to or arising out of my child(ren)’s or my utilizing Camp’s services and premises. I understand that this waiver means I and my child(ren) give up my right to bring any Claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any Claim I and my child(ren) may have to seek damages, whether known or unknown, foreseen or unforeseen. I further covenant not to sue, I discharge, and I agree to hold harmless Camp, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs, or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of Camp, its employees, agents, and representatives, whether an infection occurs before, during, or after participation in any Camp program.