

Health Screening Questions

- Have you been in close contact with a confirmed case of COVID-19 in the past 14 days?

- Are you experiencing a cough, shortness of breath or sore throat?

- Have you had a fever in the last 48 hours?

- Have you had new loss of taste or smell?

- Have you had vomiting or diarrhea in the last 24 hours?

- Do you have a temperature of 100.4 or higher? (This must be taken before boarding any transportation, traveling to camp)

If you answered “Yes” to any question, you are directed to stay home.