

COVID 19 screening for FSVC Coaches/Students/Parents

Five Stars Volleyball Club iis taking precautionary measures to protect players, coaches and families from the spread of this respiratory disease.

Yes

No

Fever in the last 2 weeks?

| Cough in the last 2 weeks? | | Yes | No |
|---|---------------------|-----|----|
| Breathing difficulty in the last 2 weeks? | | Yes | No |
| Sore throat or runny nose in the last 2 weeks? | | Yes | No |
| Have you tested positive for COVID-19? | | Yes | No |
| Have you been exposed to someone diagnosed | I with COVID-19? | Yes | No |
| An inherent risk of exposure to COVID-19 exists in any public place where people are present COVID-19 is an extremely contagious disease that can lead to severe illness and death According to the CDC, senior citizens and people with underlying medical conditions are especially vulnerable. By allowing my daughter to participate in FSVC on workouts and practices; I voluntarily assume all risks related to exposure to COVID-19. **I certify I am fever free without medication for at least 72 hours (and any children with me) | | | |
| Player Name: | _ Player Signature: | | |
| Parent Name: | Parent Signature: | | |
| Temperature at arrival: | Date: | | |

If symptoms or exposure occur in the future, please STAY HOME and notify nurse BEFORE returning