

Return to Day Camp

When your child is ready to return to day camp, complete this form and check off only 1 box. Return this form to your child's day camp operator.

Your signature, as a parent or guardian of the child, confirms that the information is true. This is important to help decrease the spread of COVID-19 and protect the safety of all staff and children in the day camp.

Child's name: _____

A COVID-19 test was taken and my child tested POSITIVE:

- My child has self-isolated for 10 days after the start of symptoms or from the date of the test (if no symptoms present); and any symptoms have improved for at least 24 hours and no fever is present.

A COVID-19 test was taken and my child tested NEGATIVE:

- My child was not exposed to a COVID-19 case and their symptoms have improved for at least 24 hours.
- My child has been assessed by a health care provider and another diagnosis has been given. Symptoms have improved for at least 24 hours (if infectious cause).
- My child has been exposed to a positive COVID-19 case and has self-isolated for 14 days since the last date of exposure. My child is well and has no symptoms.

A COVID-19 test was not taken:

- My child's health care provider has diagnosed another medical condition and symptoms have improved for at least 24 hours.
- My child has self-isolated for 10 days after the start of symptoms and their symptoms have improved for at least 24 hours.
- My child has been exposed to a positive COVID-19 case, has self-isolated for 14 days since the last date of exposure and has not had any symptoms of COVID-19 in the past 10 days.
- Someone in my child's household was isolating as a close contact, they have not had any symptoms of COVID-19 and they have completed their period of self-isolation. My child is well and has no symptoms.

In addition to the checked box above, I confirm that my child has also passed the COVID-19 Screening tool and has followed any applicable public health direction.

Parent/Guardian Name: _____

Signature: _____ Date: _____