



Greater Niagara Frontier Council, BSA

Covid -19 Mandatory Health Screening Re-Assessment

This form must be completed by all Scouts, Leaders, and all others who attend the 2021 University of Scouting on November 6, 2021. This form will be collected and maintained by the GNFC for a minimum of three (3) years from the date of completion.

Name: \_\_\_\_\_

Scouting Role: (Please circle one):      Scout      Leader      Other

Date: \_\_\_\_\_      Unit # & Type: \_\_\_\_\_

Council (please circle): GNFC      ITC      AHC      SWC      Other

**Temperature = P      or      F**

I confirm that I do not currently have, nor experienced in the last three weeks, any of the following symptoms associated with COVID-19: Fever or Chills; Cough; Shortness of breath or difficulty breathing;

Myself and my close contacts have not tested Covid positive in the past 14 days;

I have not been exposed to anyone who has been diagnosed or tested positive for COVID-19 in the past 14 days.

Signature: \_\_\_\_\_