

## 24-Hour Health Check for Staff Under 18

To be completed within 24 hours of employee's arrival at Camp Onas

**PLEASE BRING THIS FORM WITH YOU ON CHECK-IN DAY – Please do not mail it ahead.**

Dear Employee and Parent or Guardian,

Keeping everyone at Camp Onas healthy is important to us, and we need your help to make sure every person arrives at camp healthy and ready to participate fully and care for our campers.

There are a few things that we ask that you do at home before your child comes to camp:

1. Please examine your child for any indication of head lice. For information on how to do this, visit the Center for Disease Control website: **www.cdc.gov**.
2. Inspect your child's bedding for any signs of bedbugs. (The CDC also has information on this).
3. Let us know if your child has come in contact with any communicable diseases in the two weeks prior to coming to camp.
4. **Please call us before bringing your child to camp on their scheduled arrival day if your child has had a fever or infectious bug in the last 24 hours.**
5. Please send your child's health form by June 1<sup>st</sup> so our staff has time to review it.
6. Be sure to pack sunscreen and insect repellent; check that the insect repellent is effective against ticks and your child knows how and when to apply both. We recommend pre-treating some of your child's clothes with permethrin, a long-lasting tick and insect repellent for garments prior to arrival at camp.

Our goal in all this is to keep your child and everyone else at camp safe and healthy. We want to be proactive with you in prevention and detection of anything that could hinder our camp community's experience. Thank you for your help.

**Please fill out the bottom of this page and bring it with you to camp on your child's arrival for orientation, and again when he/she arrives for her session if there is a break. (Please do not mail it to Camp).**

Employee Name \_\_\_\_\_ Parent Name \_\_\_\_\_

Date Camper checked by Parent \_\_\_\_\_

I have checked my child and he/she is free of head lice.

Yes

No

If no, date of treatment: \_\_\_\_\_

I have checked my camper's bedding and it is free of bedbugs.

Yes

Has your child been exposed to any communicable diseases in the last two weeks? If "Yes," please explain:

Yes

No

Has your child experienced fever, vomiting, diarrhea, sore throat, coughing, or other symptoms in the past 24 hours? (If yes, please call the Health Center before coming to camp).

Yes

No