

USA Climbing COVID-19 Screening Questionnaire for All Event Attendees

In order to prevent the possible spread of COVID-19, please indicate if you have had any of the following symptoms in the 24 hours prior to arriving at the competition venue.

YES NO Fever (100.4 ºF or higher) a	nd/or chills in the past 24 hours	
YES NO Sore throat		
YES NO NEW cough (for anyone wit	h chronic allergies/asthma, a change f	rom your baseline)
YES NO Shortness of breath or diffic	culty breathing	
YES NO NEW onset of headache (for	r anyone with migraines or other chro	nic headache syndrome, a change from your baseline
YES NO NEW fatigue, muscle or bod	y aches (associated with any other sy	mptoms on this list)
YES NO Congestion and/or runny no	ose (for anyone with chronic allergies,	a change from your baseline)
YES NO Diarrhea, nausea or vomitin	g	
YES NO NEW loss of taste or smell		
YES NO Have you had a positive CO	VID-19 test for active virus in the past	10 days?
YES NO Within the past 14 days, have you had close personal contact with someone who has been diagnosed with COVID-19?		
_		utes or more over a 24-hour period with a person with arted or, for asymptomatic infected persons, 2 days before
If you have any of the symptoms listed at competition venue. The Jury President a	· · · · · · · · · · · · · · · · · · ·	of the questions above, you will not be allowed into the all for the competition will be notified.
While in the competition venue, please	remember the following strategies to	prevent the possible spread of COVID-19:
• Maintain at least 6 feet separat	ion from other individuals whenever p	possible.
• Wash or sanitize your hands up	on entering and leaving the building.	
 Wash hands OFTEN with soap a at least 60% alcohol while in th 		REQUENT use of an alcohol-based hand sanitizer that contain
Attendees are required to wear	a mask (over the nose and mouth) at	all times during the event.
Signature:	Date:	<u>.</u>
Signature	Date:	
(Of parent/legal guardian of attendee if y	ounger than 18 years of age)	
Print Name:	<u>.</u>	

(Of parent/legal guardian of attendee if younger than 18 years of age)

Print_Name: ______.