

COVID-19 Attendee Screening

Instructions

Follow these steps to help prevent contagion at meetings or activities. Per GSUSA, the screening questions must be asked each time girls participate in an in-person activity.

Complete the Attendee COVID-19 Screening as part of the registration or check-in for each in-person gathering. If an attendee (or her parent/guardian) answers "yes" to a question, they should be asked not to attend the gathering.

Prior to in-person activities, all participants should be screened to increase the likelihood that they:

- Have not experienced symptoms that are associated with COVID-19 in the previous 72 hours
- Have not knowingly been in contact with someone that has exhibited symptoms or has been confirmed positive with COVID-19
- Have not been to high risk geographical regions, particularly those regions that require a 14-day quarantine period.

Ask the screening questions on the day of the activity, not in advance. There are three methods to ask the questions. Use the method that works best for your group.

1. Provide the Screening Form (below) to the participant's parents/guardians in advance. Ask that they complete it on the day of the activity, and bring it with them. Review on arrival, before girls start participating.
2. Provide the Screening Form to each participant on arrival. Collect and review before participation.
3. Ask the questions verbally, and record the answers on the COVID-19 Screening Log.

Health information should never be shared with anyone who does not have a need to know. Keep information private. Retain completed forms or logs for at least three months, in case contact tracing is necessary. For additional information about COVID-19 and Girl Scouts, see sdgirlscouts.org/stayingconnected, especially the [Return to Troop Guidance](#) document.

Contact training@sdgirlscouts.org if you have questions.



COVID-19 Attendee Screening Form

Attendee Name: _____ Date: _____

Activity Type or Event Name _____

Yes	No	Questions to be asked on the day of the activity:
		1. Does the attendee have a new cough that cannot be attributed to another health condition?
		2. Does the attendee have shortness of breath that cannot be attributed to another health condition?
		3. Does the attendee have a headache that cannot be attributed to another health condition?
		4. Does the attendee have any of the following symptoms: chills, repeated shaking, muscle pain, sore throat, nausea, vomiting, diarrhea, or new loss of taste or smell?
		5. Has the attendee come into close contact (within 6 feet, for longer than 15 minutes) with someone who has a confirmed COVID-19 diagnosis within the last 14 days?
		6. Has a health care provider or public health official asked the attendee to quarantine (stay home) during the past 14 days?

Each participant must have her/his own form.

Retain the forms for at least three months.

