

### OC Recreation Field Hockey/LAX Ticket

Parents/Caregivers complete the Campers Admittance Ticket before EACH day.  
Campers without a ticket will NOT be allowed to participate. **NO EXCEPTIONS!**

Camper Name (First, Last) \_\_\_\_\_

Group: \_\_\_\_\_

Camper temperature prior to attending practice: \_\_\_\_\_

#### Pre-practice screening - Please circle answer

Does the camper live in the same household or have close contact with someone who in the last 14 days has been in isolation for COVID-19 or had a test confirming the virus?	YES	NO
Has the camper or anyone in the family (household) been in contact with someone who has tested positive for COVID-19 in the last 14 days?	YES	NO

Has the camper exhibited any of the following symptoms today (or within the last 24 hour) which cannot be better explained by another condition:

Fever	YES	NO	Unusually weak/Fatigued	YES	NO
Cough	YES	NO	Loss of taste or smell	YES	NO
Sore Throat	YES	NO	Muscles Aches or Pain	YES	NO
Shortness of breath	YES	NO	Runny/Congested Nose	YES	NO
Repeated shaking/shivering	YES	NO	Diarrhea	YES	NO

Please provide additional information if symptoms present are better explained by another condition (e.g. exercise induced muscle soreness, diagnosed seasonal allergies).

**If the player is experiencing any of the above symptoms prior to practice, without an explanation not related to possible COVID-19, the camper is required to STAY HOME from practice until symptom free.**

I certify to the best of my knowledge; this information is accurate.

Parent/caregiver full name printed: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/caregiver signature: \_\_\_\_\_