

Each student-athlete will self-screen for COVID-19 at home prior to EVERY game and practice.

In the past 24 hours, have You (student) had any of the following symptoms:

**YES**                      **NO**

- Fever (temp over 100.4° F)
- Chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea
- Lost your ability to smell or taste

Are You (student) currently under COVID19 related quarantine?

**Yes**                                      **No**

Have You (student) or any Household Contacts been tested\* for COVID-19 in the last 48 hours?

**Yes**                                      **No**

\*If the students COVID-19 test result in last 48 hours was negative, you may participate as long as you remain without symptoms.

**If you answer “Yes” to any of these questions, the student-athlete is NOT allowed to participate in any practice or game. The student should contact their primary care physician for the next steps such as testing and isolation.**