



Fond du Lac County Health Department

City/County Government Center

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Public Health
Prevent. Promote. Protect.

**Fond du Lac County
Health Department**

HEALTH REPORTING AGREEMENT

FOR COVID-19 RESPONSE

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus.

Participants should self-monitor daily for these COVID-19 symptoms:

1. Cough
2. Shortness of breath or difficulty breathing
3. Fever >100F
4. Chills
5. Muscle pain
6. Sore throat
7. New loss of taste or smell

This list is not all inclusive. Other less common symptoms have been reported, including gastrointestinal symptoms like nausea, vomiting, or diarrhea.

Participants must report if they are diagnosed with COVID-19:

- by a positive lab test, or
- diagnosis from a health care provider (without lab testing)

Participants must also report COVID-19 Exposures:

- Living with a person that has been diagnosed with COVID-19, or
- Having close contact with a person that has been diagnosed with COVID-19

I understand the Participant Health Reporting Agreement for COVID-19 and agree to:

1. Self-monitor prior to reporting to work each day.
2. Report symptoms, positive diagnosis or exposure to COVID-19 to the Person-in-Charge.
3. Follow the exclusions and/or restrictions that may be required of me.

I understand and agree to follow all best practices adopted by my business to prevent the spread of COVID-19 including but not limited to:

1. Communicate virtually whenever possible.
2. Limit in-person meetings and gatherings.
3. Practice frequent hand hygiene.
4. Wear PPE (cloth face coverings, masks, gloves, eye protection, etc) required by my employer.
5. Maintain social distancing with other employees, customers, and clients.
6. Follow heightened cleaning and sanitizing of workspace and equipment.

Participant Name (please print) _____

Parent Name (please print) _____ Date _____

Parent Signature _____ Date _____

Camp Long Lake

Assumption of the Risk and Waiver of Lawsuit/Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is extremely contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. The exact methods of spread and contraction are unknown, and there is no known treatment, cure, or vaccine for COVID-19. Evidence has shown that COVID-19 can cause serious and potentially life threatening illness and even death.

Camp Long Lake (“Camp”) has put in place preventative measures to reduce the spread of COVID-19; however, Camp cannot guarantee that you or your child(ren) will not become infected with COVID-19. Camp cannot prevent you or your child(ren) from becoming exposed to, contracting, or spreading COVID-19 while attending at Camp. It is not possible to prevent against the presence of the disease. Therefore, if you or your child(ren) choose to utilize Camp’s services and/or enter onto Camp’s property you may be exposing yourself or your child(ren) to COVID-19 **and you will be increasing your risk and your child(ren)’s risk of contracting or spreading COVID-19.**

ASSUMPTION OF RISK: I have read and understood the above warning concerning COVID-19. I acknowledge the contagious nature of COVID-19 and hereby choose to assume and accept the risk of contracting COVID-19 for myself and/or my child(ren) in order to utilize Camp’s services and enter on Camp’s property. These services are of such value to me and/or to my child(ren), that I accept the risk of being exposed to, contracting, and/or spreading COVID-19 in order to utilize Camp’s services and property in person. I understand that I and/or my child(ren) do not need to attend Camp, it is completely voluntary, and I and/or my child(ren) can choose to not attend if we desire. I understand that the risk of becoming exposed to or infected by COVID-19 at Camp may result from the actions, omissions, or negligence of myself, my child(ren), and others, including, but not limited to, Camp employees, volunteers, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my or my child(ren)’s attendance at Camp or participation in Camp programming (“Claims”).

WAIVER OF LAWSUIT/LIABILITY: On my behalf, and on behalf of my children, I hereby forever release and waive my right to bring suit against Camp and its owner the Potawatomi Area Council, and the Camp’s and

Council's officers, directors, managers, officials, trustees, insurers, agents, employees, or other representatives in connection with exposure, infection, and/or spread of COVID-19 caused by or in any way related to or arising out of my child(ren)'s or my utilizing Camp's services and premises. I understand that this waiver means I and my child(ren) give up my right to bring any Claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any Claim I and my child(ren) may have to seek damages, whether known or unknown, foreseen or unforeseen. I further covenant not to sue, I discharge, and I agree to hold harmless Camp, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of Camp, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Camp program.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE:

NAME OF PERSON ATTENDING CAMP (this form must be filled out and signed for each person attending Camp):

Attendee Name (printed): _____

If Attendee is 18 or older:

Signature of Attendee: _____ Date: _____

If Attendee is under 18

I am the parent or legal guardian of the minor named above. I have the legal right to consent to and, by signing below, I hereby do consent to the terms and conditions of this Assumption of the Risk and Waiver of Lawsuit/Liability Relating to Coronavirus/COVID-19.

Signature: _____ Date: _____

Name (printed): _____