



Council Camps and Events Unit Leadership COVID Statement

In submitting our Unit Roster, I have reviewed a COVID-19 Screening Form for all the members of my unit and everyone is asymptomatic. None of the members from our group has had recent contact with a person having COVID-19 in the past 14 days.

I understand all members of my unit will not exceed the campsite/cabin capacity and must wear a personal mask at all times to protect from individuals who are not members of their household. Our leaders will enforce regular handwashing for all the members of our group while at camp.

I understand all the members of my unit must stay together at all times while at camp. Unit leadership will be with the group at all times. Our group will practice social distancing and not interact with other groups at the camp.

I understand if a member of my group starts exhibiting COVID symptoms I am to (1) isolate the person from the other members of my group; (2) contact the parents for transportation home or for medical care and testing; (3) Call the cell phone the Camp Ranger or Scouting Professional providing the camper's name; (4) contact the parents of the rest of our group members about possible COVID exposure; and (5) wait for further instruction from the Camp Leadership or Pa. Department of Health.

I have reviewed all the camp rules. I understand that if members of my unit are not following the camp rules, our group will need to leave the camp and may be barred from making future camp reservations.

Unit Number _____

Date _____

Unit Leaders Signature _____