



Colonial League for Interscholastic Sports Inc.

Bangor - Catasauqua - Moravian Academy - Northern Lehigh - Northwestern Lehigh
 Notre Dame G.P. - Palisades - Palmerton
 Pen Argyl - Salisbury - Saucon Valley - Southern Lehigh - Wilson

ALL STUDENT-ATHLETES & TEAM PERSONNEL COVID-19 TRAVEL SCREENING VERIFICATION FORM

DATE OF SCREEN:	
SCHOOL NAME:	
LEVEL(S) & SPORT:	
ATHLETIC TRAINER NAME:	
OPPONENT SCHOOL NAME:	

This is to certify that the following were screened for COVID-19 symptoms before boarding for transportation to your facility and were found to be symptom-free and below the 100.4 degree temperature threshold.

TOTAL NUMBER OF STUDENTS:	
TOTAL NUMBER OF COACHES / STAFF:	

Attest (Athletic Trainer / Designee Signature)

Date

SCREENING QUESTIONS:

SYMPTOM	YES	NO
Fever? <ul style="list-style-type: none"> • Temperature greater than 100.4 under age of 18 • Temperature greater than 100.0 over age of 18 		
New or Worsening Cough?		
Shortness of Breath or Trouble Breathing?		
Sore Throat (that is different from your seasonal allergies)?		
New Loss of Smell or Taste or Both?		
Diarrhea or Vomiting?		
Do you have a household member or close contact who has been diagnosed with COVID-19 in the past 10-14 Days?		
Have you traveled outside of Pennsylvania in the last 14 Days? <ul style="list-style-type: none"> • If Yes, where? 		