

Iredell County Recreation Center Attestation Form – Adult (Age 18+)

First Name: _____

Last Name: _____

1. Have you had had close contact (within 6 feet for at least 15 minutes. This could have been a 15 minute conversation or several shorter conversations that total at least 15 minutes) in the last 14 days with someone diagnosed with COVID-19, or has any health department or health care provider been in contact with you and advised you to quarantine?

- Yes – This person should not be in the Center. The person may return 14 days after the last time he/she had close contact with someone with COVID-19, or as listed below.
- No – This person can be at the Center if not experiencing symptoms.

2. Do you have any of these symptoms:

- Fever
- Chills
- Shortness of breath or difficulty breathing
- New cough/itchy throat
- New loss of taste or smell
- GI Issues
- Stuffy Nose

If person has any of these symptoms, they should go home, stay away from other people, and should call health care provider.

3. Since they were last at the Center, have you been diagnosed with COVID-19?

- Yes
- No.

If a person is diagnosed with COVID-19 based on a test, their symptoms, or does not get a COVID-19 test but has symptoms, they should not be at the Center and should stay home until they meet the criteria below.

COVID-19
SPECIFIC:

A person may be able to return to Center when they can answer YES to ALL three questions:

- Has it been at least 10 days since the they first had symptoms?
- Has it been at least 24 hours since the they had a fever, without using fever-reducing medicine?
- Has there been symptom improvement, including cough and shortness of breath?

If the person has had a negative COVID-19 test, they can return to the Center once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours.

If the person has been diagnosed with COVID-19 but does not have symptoms, they should remain away from the Center until 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test.

If the person has been determined to have been in close contact with someone diagnosed with COVID-19, he/she should remain away from the Center for 14 days since the last known contact, unless he/she test positive. In which case, criteria above would apply. Person must complete the full 14 days of quarantine even if he/she test negative.

A person may return to the Center, if they receive confirmation of an alternative diagnosis from a health care provider that would explain the COVID-19 like symptom(s), once there is no fever without the use of fever-reducing medicines and they have felt well for 24 hours.

I attest that this information is true to the best of my knowledge as of:

_____/_____/_____, _____:_____ AM PM
MONTH DAY YEAR TIME CIRCLE ONE

Signature: _____