

Return to Scouting After COVID-19 Shutdown: Commit to Your Community, "A Scout is Helpful"

| I will commit to wearing a mask and social distancing in higher-risk situations where it is recommended by my Unit, the GSMC, and/or the BSA | | | |
|---|--|--|---|
| I will commit to checking my temperature and assessing my own symptoms on a daily basis. | | | |
| I will disclose any possible COVID-19 symptoms or possible exposure to someone with known or suspected COVID-19 to my parents and Scout leaders so I can refrain from activity and prevent any possible spread of infection | | | |
| I will encourage other Scouts in my Unit to practice these same healthy behaviors. | | | |
| I will not share water bottles or other personal items. | | | |
| I will regularly wash my hands and use hand sanitizer before, during and after meeting/activities. | | | |
| I will avoid touching my face and, if I must, use hand sanitizer afterwards. I will wipe down all tables/gear I use with a disinfectant wipe at the end of every | | | |
| P Scout presents with one of these symptoms: • Fever • Muscle aches • Chills • Headache • Rigors | Scout evaluated by medical professional for illness symptoms | Tests positive for COVID-19 or goes untested | Sits out for a minimum of 10 days until recovered |
| New loss of smell or taste Cough | | | |
| Shortness of breath Difficulty breathing Congestion or runnynose Diarrhea Nausea or vomiting | Diagnosed with non-COVID condition (asthma, allergies, strep throat) | Returns to activity per medical professional recommendations | Returns to activity after 3 days of no symptoms |
| Scout Name: | | Date: | |
| Scout Signature: | | | |