



BASKETBALL CAPE BRETON

COVID-19 SELF SCREENING QUESTIONNAIRE

Please do not attend any Basketball Cape Breton programs if you answer YES to any of the following questions:

- Do you have a:
 - new or worsening cough?
 - fever/chills?
 - sore throat?
 - headache?
 - runny nose?
 - new or worsening shortness of breath?

- Have you or someone in your household travelled out of Nova Scotia, other than to Prince Edward Island, within the last 14 days?

- Have you been in close contact with someone known to have COVID-19?

- Have you had COVID-19 or been tested for COVID-19 due to symptoms or potential exposure in the past 14 days?

- As per the Public Health Alert: Have you been at any location on the specified date and instructed to self-isolate and be tested for COVID-19?