
Collegiate Water Polo Association

129 West 4th Street Bridgeport, PA 19405 (610) 277-6787 Fax: 7382
commissioner@collegiatewaterpolo.org www.collegiatewaterpolo.org

COVID-19 Questionnaire for Officials

The Collegiate Water Polo Association has adopted the CDC's COVID-19 screening tool to determine your eligibility to participate as an official. A Questionnaire must be completed before every weekend.

- Answer **all** the questions below “yes” or “no”
- Sign and scan or take a photograph of the completed form
- Send it electronically between 3 PM Thursday and 9 AM Friday morning to commssioner@collegiatewaterpolo.org

1. Have you experienced any of the following symptoms in the past 48 hours:

Yes ___	No ___	fever or chills
Yes ___	No ___	cough
Yes ___	No ___	shortness of breath or difficulty breathing
Yes ___	No ___	fatigue, muscle or body aches
Yes ___	No ___	headache
Yes ___	No ___	new loss of taste or smell
Yes ___	No ___	sore throat
Yes ___	No ___	congestion or runny nose
Yes ___	No ___	nausea or vomiting
Yes ___	No ___	diarrhea

Yes ___ No ___ Within the past 14 days, have you been in close physical contact (6 feet or closer for at least 15 minutes) with a person who is known to have laboratory-confirmed COVID-19 or with anyone who has any symptoms consistent with COVID-19?

Yes ___ No ___ Are you isolating or quarantining because you may have been exposed to a person with COVID-19 or are worried that you may be sick with COVID-19?

Yes ___ No ___ Are you currently waiting on the results of a COVID-19 test?

My temperature is _____

Signature

Print name

Date

If you answer “yes” to any of the above questions, you are not eligible to officiate this weekend. Please call Commissioner Dan Sharadin immediately at 610-505-8761, so a replacement can be notified.