



Screening – COVID 19

Name _____

Date _____

All staff and students must complete the screening for COVID 19 prior to the start of the sailing course:

a) Have you travelled outside of Canada in the last 14 days? Yes No

b) Are you experiencing any symptoms of COVID-19
(e.g., shortness of breath, cough, sore throat, or fever)? Yes No

c) Have you been in close contact with a person showing
symptoms or tested positive for COVID-19? Yes No

d) Have you been in close contact with a person with
acute respiratory illness who has been outside of Canada
in the last 14 days? Yes No

I confirm I have answered the above questions truthfully.

Signature

Any staff or students who answer yes to any of the above questions are not permitted onboard or to participate in the course.