

CHESTER VALLEY DANCE ACADEMY

2020 HEALTH REPORT/TRACKING FORM

610-594-2771

WWW.CHESTERVALLEYDANCE.COM

130 S. VILLAGE AVE, EXTON, PA,

19341

All members (students, teachers, staff) showing symptoms of COVID-19 are required to complete the CVDA Health Report / Tracking form. By completing this form you are assisting the studio to maintain a safe environment for our members. Once a submission is made you will not be able to participate in any CVDA events until a physician has cleared you for activity. If any member tests positive for COVID-19, they will not be permitted to attend any CVDA class/event until a period of self quarantine (14 days) has taken place. Additionally, a return to the studio will only be allowed upon approval from a physician and the studio director.

COVID-19 Symptoms:

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms may have COVID-19:

Fever or chills

Cough

Shortness of breath or difficulty breathing

Fatigue

Muscle or body aches

Headache

*source: www.cdc.gov

New loss of taste or smell

Sore throat

Congestion or runny nose

Nausea or vomiting

Diarrhea

This self-reporting form is to notify CVDA of persons believed to be affected by the Corona Virus (COVID-19).

Background Information

INFORMATION TRANSMITTED BY THIS FORM WILL BE USED BY CVDA ADMINISTRATION TO DETERMINE APPROPRIATE FOLLOW-UP FOR ADDRESSING THE NEEDS OF THE STUDIO COMMUNITY.

First Name _____

Last Name _____

Email _____

Family/Primary Phone _____

Classes Enrolled In

Please list all classes if taking more than one. Include Day of the Week & Time

Nature of this Report

- Confirmed Covid-19 Case
- Potential Covid-19 Case
- Notification of Self Quarantine
- Other*

**If Other, please describe:* _____