

Coronavirus Contact Tracing Form

The purpose of this form is to collect information from everyone who enters the Church for the purpose of contact tracing for COVID-19. The information will not be used for any other purpose.

Everyone entering the church must complete and sign this form before being allowed to conduct church business or enter the facility.

Name:			
Phone #:			
Email Address:			
Was the temperature within the accept	ptable range (<100.4)? Yes No	
(If your temperature is above the acceptable ra	ange, you will not be al	llowed to come inside th	e church.)
Have you been vaccinated against Coronaviru	us? Yes	Prefer not to answer_	
n the past 14 days have you been exposed to gathering where exposure is suspected?			ge public
f yes, have you been tested for COVID-19?	Yes	No	
Signature:	Date:		

Remember to always maintain a social distance of 6 feet when possible. Please wear a mask at all times covering your nose and mouth while in the church.

If someone tests positive for Coronavirus you will be notified based on the information received on this form.

You may utilize the Balcony & the Main Sanctuary for seating

You will be given specific directions on safety protocols during the service.

Please return this form to a member of the Administrative Team.