



Victoria Falls Community Association, Inc.
13701 Belle Chasse Boulevard
Laurel, MD 20707-9448
410-813-0900

MEMBER'S COVID-19 ACKNOWLEDGEMENT

In consideration for receiving permission to BE ON PREMISES of the Resort Club during the COVID-19 pandemic I attest that:

- I have not been diagnosed with COVID-19 and cleared as non-contagious by state or local public health authorities.
- I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever of 100.0F/38C or greater, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
- I have not been asked by a doctor to take a test for COVID-19.
- I have not traveled internationally or been on a cruise within the last 14 days.
- I have not traveled to a highly impacted area within the United States of America within the last 14 days.
- I have not been exposed to someone with a suspected and/or confirmed case of the COVID-19.
- I am following all CDC recommended guidelines and limiting my exposure to the COVID-19.

IN WITNESS WHEREOF, I have signed this COVID-19 ACKNOWLEDGEMENT

_____ day of _____, 2021.

PRINT NAME: _____

SIGNATURE: _____