

**Christ Lutheran Church
San Clemente, California
COVID-19 Health Questionnaire**

Your health and well-being are of the utmost importance and we are taking measures to keep the entire congregation, staff, employees and volunteers in a safe environment. Therefore, ANYONE coming into our Church Campus will be screened and part of our screening process will include taking their temperature and asking the following questions.

Within the last 14 days (check any which apply with an affirmative answer):

___ Have you experienced a new cough that you cannot attribute to another health condition?

___ Have you experienced new shortness of breath that you cannot attribute to another health condition?

___ Have you experienced a new sore throat that you cannot attribute to another health condition?

___ Have you experienced new muscle aches that you cannot attribute to another health condition or a specific activity, such as physical exercise?

___ Have you had a temperature at or above 100.4 degrees or the sense of having a fever?

___ Have you had close contact, without the use of PPE, with someone who is currently sick with suspected or confirmed COVID-19?

IF THE INDIVIDUAL ANSWERS "YES" TO ANY OF THE ABOVE QUESTIONS, THEY WILL NOT BE ALLOWED ADMISSION TO OUR FACILITIES.

Date: _____

Name: _____ (print)

Signed: _____

___ (initial) I agree that if it is determined that I had the COVID-19 virus while I participated in a Worship Service at the Church I will immediately contact Lynn McKenrick at (909) 544.0035.

Please note that all of this information will remain Confidential and will be stored in a secure location.