

COVID-19 Agreement

By participating in this event, you are acknowledging that an inherent risk of exposure to COVID-19 exists in any public place where people are present. By participating in this event, you and your guests/family voluntarily assume all risks related to exposure to COVID-19 and agree not to hold National United Methodist Church, or any of their affiliates, directors, officers, employees, agents, contractors, or volunteers liable for any illness or injury.

I also understand and agree to abide by all necessary safety and health requirements, as required, by NUMC. I understand that I will need to provide NUMC with accurate contact information to assist NUMC and public health official in contact tracing any known exposures. I understand that NUMC will report any known cases of exposure to the appropriate public health authorities and will assist in the necessary contact tracing. I agree to also assist in any follow up contact tracing, as necessary, to protect greater public health and safety. I understand that NUMC will do its utmost to protect my privacy and share my information only in on a need to know basis in the event it becomes necessary to protect public health and safety. I agree to be compassionate and kind to NUMC staff, volunteers, etc. that I come into contact with and to show support and compassion to members of our community that may get exposed to COVID-19. I understand that the best way to protect the health and safety of our community is to follow required safety procedures, including, but not limited to: wearing masks, maintaining social distancing of 6 feet, and frequent hand-washing, and reporting any symptoms or exposures.

Health Screening

Do you or anyone in your household have a fever of 100.4 or higher in the last 3-5 days? Y / N

Do you or any member of your household have a cough, shortness of breath, or loss of smell? Y / N

Do you feel well? Y / N

Have you attended any events with a large number of people where wearing masks and social distancing were not observed in the last 3-5 days? Y / N

Have you traveled outside of our tri-state region in the last 3-5 days? Y / N

Signature

Date