

St Edward the Confessor Church Attestation

To gather at this time, every person must give their name and contact information and attest to the four conditions below. This information may be shared with the DOH should a potential exposure occur within the congregation. **Only one form is required for each service for a family living in the same house and attending services together.** Thank you for your assistance in this matter.

Date: _____ **Time:** _____

Name(s) & Birthdate(s): _____

Email: _____ **Phone:** _____

I attest that:

- I (we) have not experienced any symptoms of COVID-19 in the past 14 days
- I (we) have not tested positive for COVID-19 in the past 14 days
- I (we) have not been in direct contact with anyone who has tested positive or shown symptoms of COVID-19 in the past 14 days
- I (we) have not visited a state with a positivity rate of 10% or higher for COVID-19 in the past 14 days

Signature: _____

Please print this form and place it in the receptacle upon gathering in the church. **If completing the form in church**, please drop your completed form in the receptacle after completion. **Pencils should be disposed of in the garbage can** next to the form receptacle.

Thank you and May God Bless You and Hold You