

SIGN-IN AND QUESTIONNAIRE

DATE	NAME & TELEPHONE	QUESTIONNAIRE	TIME IN	TIME OUT
		Did I travel by air in the past two weeks? <i>circle one</i> Y N Have I been close to someone infected with COVID-19? Y N Is anyone in my household quarantined or in isolation? Y N Do I have a cough, fever, shortness of breath, runny nose, or sore throat? Y N If you answered NO to all the questions, you are permitted to enter the church nave.		
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