

DAY OF EVENT COVID-19 QUESTIONNAIRE

Each participant must complete this form within 24 hours prior to attending any Alabama AG District Event.

An inherent risk of exposure to COVID-19 exists in any public place where people are present. COVID-19 is a contagious virus that can lead to severe illness and death. According to the Centers for Disease Control and Prevention, senior citizens and those with underlying medical conditions are especially vulnerable. By attending Alabama District Council events, I voluntarily assume all risks related to exposure to COVID-19. I understand that some activities may not follow traditional social distancing.

Each participant will be asked to submit to a touch-less temperature check upon arrival at the event. Anyone with a temperature 100.4 degrees or higher will be isolated for further medical evaluation. **I understand that if I develop symptoms of COVID-19 while at the event, I may be sent to a testing site to be checked for COVID-19, and I also understand that I may be asked to leave the event prior to receiving COVID-19 test results.**

I understand that if I answer yes to any of the questions below, I will not attend the event in person. (*)

1. Have you tested positive for COVID-19 in the past 14 days? YES NO

2. Have you knowingly had contact with anyone who has tested positive for COVID-19 in the past 14 days? YES NO

3. Have you had a combination of these new symptoms in the past 14 days? YES NO

- Fever of 100.4 or higher (without fever reducing medication)
- Feeling feverish (chills, sweating)
- New cough
- Difficulty breathing
- Sore throat
- Muscle aches or body aches
- Vomiting or diarrhea
- New loss of taste or smell

(*) If you have been seen by a medical professional for these new symptoms and have been diagnosed with something other than COVID-19, answering **yes** to question **3** does not prohibit you from attending an Alabama AG District event.

I release Alabama District Council of the Assemblies of God from all liability associated with the risks listed above.

Church Name: _____ **Church City:** _____

Email: _____ **Phone Number:** _____

Participant's Name (Please print): _____

Signature: _____ **Date:** _____

Parent/Guardian Signature (if under 18): _____ **Date:** _____

According to the Centers for Disease Control and Prevention, some Alabama District Council events are categorized at the highest risk level, because individuals from various geographical areas may mix between groups and may not always remain spaced apart.