

Please answer the following questions before entering and bring with you each time you come to Mass.

Do you have a fever (temperature over 100.3F) without having taken any fever reducing medication?	Y	N
Have you, or anyone you have been in close contact with been diagnosed with COVID-19 or been placed on quarantine for possible contact with COVID-19?	Y	N
Have you been asked to self-isolate or quarantine by medical professional or local public health official?	Y	N
Have you traveled outside of the United States in the last 14 days?	Y	N
How should we contact you if we need to inform you have been exposed to COVID-19?		
Please provide preferred contact info_____		

Please PRINT Name(s)_____Date_____

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