CHURCH GATHERING WAIVER

Signature required just one-time.

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. As a result, federal, state, and local governments and agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. We are doing everything we can to be compliant with all regulations and ensure your safety. We have put in place preventative measures to reduce the spread of COVID-19, but we cannot guarantee that you or family members will not become infected with COVID-19.

By entering this building and/ or by participating in programs, services, and activities of **Our Saviour's Lutheran Church,** you agree to the following:

On behalf of yourself and your children, you hereby release, covenant not to sue, discharge, and hold harmless **Our Saviour's Lutheran Church,** its employees, agents, and representatives, of and from all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating to your participation in our programs, services or activities. You understand and agree that this release includes any claims based on the actions, omissions, or negligence of this organization, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any such program, service or activity.

DATE	SIGNATURE	PRINTED NAME

CONTACT INFO & SCREENING QUESTIONS

Daily sign-in required by all who enter the building.

To enter the building, you must be able to answer "NO" to all the following questions:

- Do you have any Covid symptoms such as fever, cough, shortness of breath, loss of taste or smell, chills, sore throat, headache, muscle pain, rash, nausea, vomiting, or diarrhea?
- Have you had any international travel in the past 14 days?
- Have you had a positive Covid test in the past 14 days or are you currently awaiting results from a Covid test?
- Have you had exposure to anyone with Covid or suspected of having Covid in the past 14 days?

If you answer "YES" to any of these questions, please do not enter the building. If you are ill, please do not enter the building.

DATE	NAME	PHONE	√ IF ANSWERING NO TO THE ABOVE QUESTIONS