

**ATTENDANCE SCREENING QUESTIONNAIRE FOR ONTARIO SDA OUTDOORS  
WORSHIP SERVICE ON 10/10/20**

**Please note:**

- The information that you supply must be valid and true on October 10, 2020.
- A **YES** answer to questions 1 – 3 should raise a red flag of concern.
- If you answer **YES** to any of questions No. **4 – 6(f)**, we kindly ask that you rather not attend the service, for your own safety and the safety of others

**QUESTIONS:**

- 1) \_\_\_ **YES** \_\_\_ **NO** During the past 14 days, have you been travelling outside of the USA ? If so, to what Countries? \_\_\_\_\_
- 2) \_\_\_ **YES** \_\_\_ **NO** During the past 14 Days, have you been travelling outside of the State of California? If so, to what other State(s)? \_\_\_\_\_
- 3) \_\_\_ **YES** \_\_\_ **NO** During the past 14 days, have you been attending any large gatherings, such as a big sports event, a political rally, a large concert, etc.?
- 4) \_\_\_ **YES** \_\_\_ **NO** During the past **21** days, have you been tested **Positive** for Covid-19?
- 5) \_\_\_ **YES** \_\_\_ **NO** During the past **21** days, have you been in contact with any person who has been tested **Positive** with Covid-19?
- 6) During the past **7 days**, have you experienced any of the following:
  - a) \_\_\_ **YES** \_\_\_ **NO** Shortness of breath?
  - b) \_\_\_ **YES** \_\_\_ **NO** Coughing?
  - c) \_\_\_ **YES** \_\_\_ **NO** A sore throat
  - d) \_\_\_ **YES** \_\_\_ **NO** Headaches ?
  - e) \_\_\_ **YES** \_\_\_ **NO** Diarrhea ?
  - f) \_\_\_ **YES** \_\_\_ **NO** A running nose

**Thank you for supplying this information. We appreciate your help.**

**Your Name:** \_\_\_\_\_ **Tel.** \_\_\_\_\_