



All Worshippers and/or Guests at **TheA**

Upon entering this facility, you are assuming the risk of sickness, injury or death that may result from the inherent exposure of contracting the transmissible disease called COVID-19 (coronavirus).

Per Antioch Missionary Baptist Church's protocols, truthfully respond to this COVID-19 Screening Questionnaire:

1. Have you, someone in your household, or someone in close contact with you and your family had a recent diagnosis of COVID-19 or suspected exposure to COVID-19 within the past 14 days?
2. Have you had body aches, sore throat, unexplained headaches, nausea/vomiting/diarrhea, unintentional weight loss greater than 10 pounds, recent loss of taste/smell, chills, night sweats, and/or fever of 100.4 degrees or higher in the past 14 days?
3. Have you had any cough or shortness of breath in the past 14 days?
4. In the past 14 days have you or anyone in your household traveled outside of the U.S. or to a location in the U.S. where an increased incidence of COVID- 19 has been reported? And have you tested negative within 3- 5 days of your return?

If you answered **“Yes”** to any of these questions, please do not enter the facility. We invite you to join us virtually for the worship experience.

If you answered **“No”** to all of these questions, please sign your name, provide phone number and date on the lines below to confirm your answers. Information will be used only for contact tracing purposes only, if need.

Print Name

Phone Number

Signature

Date

**Failure to answer these questions truthfully puts others at risk for their safety.
We strongly encourage everyone to be up to date on their vaccine doses and booster shots!
Thank you for your cooperation!**