

SCREENING IS REQUIRED FOR EVERYONE, REGARDLESS OF VACCINATION STATUS

Temple Lutheran Church Facilities COVID-19 SCREENING



PLEASE READ EACH QUESTION CAREFULLY	PLEASE CIRCLE THE ANSWER THAT APPLIES TO YOU	
<p>1. Have you experienced any of the following <u>symptoms</u> in the past 48 hours:</p> <ul style="list-style-type: none">• fever or chills• cough• shortness of breath or difficulty breathing• fatigue• muscle or body aches• headache• new loss of taste or smell• sore throat• congestion or runny nose• nausea or vomiting• diarrhea	YES	NO
<p>2. Are you <u>isolating</u> or <u>quarantining</u> because you tested positive for COVID-19, or are you <u>waiting</u> for a result of a COVID-19 test, or are <u>worried</u> that you may be sick with COVID-19?</p>	YES	NO
<p><i>If you are fully vaccinated (i.e. your final vaccination was more than 2 weeks ago), you can skip question 3 and 4:</i></p> <p>3. Within the past 14 days, have you been in <u>close physical contact</u> (6 feet or closer) with anyone who is known to have tested positive for COVID-19, or anyone who has any symptoms consistent with COVID-19?</p> <p>4. Have you <u>traveled overnight</u> by airplane, coach or train, or in a car with people from outside of your household within the last 10 days?</p>	YES	NO
Did you answer NO to ALL QUESTIONS?	Access to TLC facilities APPROVED.	
Did you answer YES to ANY QUESTION?	Access to TLC facilities NOT APPROVED. Confine yourself to your home and consider contacting your health care provider.	

EVERYBODY is required to WEAR A MASK at all times



cdc.gov/screening

Thank you for helping us to protect you and our community.