



In order to protect the health and safety of all of our members and guests, anyone attending services must complete the following:

I attest, by signing my name, to the following:

I have read and agree to abide by the ***Merrick Jewish Centre Guide to Re-Opening.***

I do **NOT** have any of the following symptoms:

Fever > 99.5° F; shortness of breath, sore throat, body aches, chills, new loss of taste or smell.

Please read carefully and check one (1) box:

- I have **NOT** traveled outside NY State or recently arrived in NY from a non-contiguous state (excl. NJ, CT, PA) in the last 14 days.
- I have recently arrived in New York from a non-contiguous state but have quarantined for at least 14 days.
- I have recently arrived in New York from a non-contiguous state and have evidence of two (2) negative COVID-19 tests as per Gov. Cuomo Executive Order.

No one in my household has had the following symptoms within the past 14 days:

- 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, vomiting or diarrhea

I do not have any reason to believe I or anyone in my household has been exposed to COVID-19 **and**, to the best of my knowledge I have not been in close proximity to any individual who tested positive for COVID-19.

Name (print) _____

Signature _____

Phone # _____ Email: _____

Date _____