

Trinity Building Use Participant Waiver

All participants attending a meeting or event at Trinity must have a completed waiver on file. This form may be filled out here to be held on file by the Church Administrator, or a paper copy may be completed and kept on file by the Group Leader.

Please note that there is no completely risk-free way to gather in person at this time. The decision to gather in person is an action taken at one's own risk. Trinity Presbyterian Church may not be held liable for exposure.

By signing this form, the participant agrees to follow the guidelines established and not hold Trinity Presbyterian Church responsible for exposure.

Participant signature

Date



office@trinitypresbyterianharrisonburg.org (not shared)

[Switch account](#)



* Required

I will not attend if me or anyone in my household has experienced in the past 14 * days or are currently experiencing symptoms of COVID-19 (such as fever, chills, cough, shortness of breath, chest pain), or other possible symptoms of acute contagious illness.

Yes

I will bring and wear a face mask covering my nose and mouth. If I do not have * one, I will contact my group leader prior to coming to the meeting to see if one can be made available.

Yes

I will practice physical distancing by maintaining a distance of at least 6 feet * from all other participants who are not part of my household.

Yes



I will use hand sanitizer or wash my hands thoroughly (> 20 seconds with soap and water) after touching commonly touched surfaces with my hands and before and after touching my face. *

Yes

I am aware that bathroom facilities should be used only in case of emergency. If used, I will follow the instructions posted in the bathrooms to sanitize after use. *

Yes

I have considered my own risk factors, such as age over 60, immunosuppression, chronic lung disease, or other preexisting health conditions associated with worse outcomes of Covid-19, in deciding whether to participate in person. *

Yes

By signing this form, I agree to follow the guidelines established and not hold Trinity Presbyterian Church responsible for exposure. *

Yes

Please type your name as an electronic signature: *

Your answer

Parent or guardian signature for participants under the age of 18:

Your answer



Date *

Date

mm/dd/yyyy

Submit

Clear form

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