

Our Redeemer Lutheran Church COVID-19 Screening Questionnaire

Name \_\_\_\_\_

Date of Worship Service \_\_\_\_\_ - \_\_\_\_\_ -2021

Temperature \_\_\_\_\_ (If over **99.4 deg** – cannot attend worship)

**Screening Questions**

1. Have you been sick in the past 48 hours? Yes \_\_\_\_\_ No \_\_\_\_\_
2. Have you had a fever in the past 48 hours? Yes \_\_\_\_\_ No \_\_\_\_\_
3. Do you have any of the COVID-19 symptoms? Yes \_\_\_\_\_ No \_\_\_\_\_
4. Have you come in contact with anyone with COVID-19 in the past 14 days? Yes \_\_\_\_\_ No \_\_\_\_\_
5. Have you or anyone in your household had a COVID-19 test in the past 14 days and are awaiting results, or tested positive? Yes \_\_\_\_\_ No \_\_\_\_\_
6. Have you been told to quarantine for any reason in the past 14 days? Yes \_\_\_\_\_ No \_\_\_\_\_
7. Have you or any member of your household been out of Illinois for more than 24 hours, in the past 14 days? Yes \_\_\_\_\_ No \_\_\_\_\_. If Yes, per Cook County & IDPH guidelines, you need to quarantine for 14 days.

If you answered yes to any of these questions you will be asked to leave and will not be allowed to attend the worship service.

Screening passed: Yes \_\_\_\_\_ No \_\_\_\_\_

Pew # \_\_\_\_\_

Receiving Holy Communion Today ? Yes \_\_\_ No \_\_\_