COVID-19 SCREENING QUESTIONNAIRE
REQUIRED FOR EVENT PARTICIPATION AND FACILITY/WORKSITE ACCESS

The safety of our employees, volunteers, participants, partners/contractors, families and visitors, etc. remain the Anacostia Watershed Society’s overriding priority.

To prevent the spread of COVID-19 and reduce the potential risk of exposure to our workforce, volunteers, and event participants, we are conducting a simple screening questionnaire. Your participation is important to help us take precautionary measures to protect you and everyone at the event and/or in our facilities. Thank you.

<table>
<thead>
<tr>
<th>Your Name:</th>
<th>Personal Phone Number (Mobile/Home):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your Company/Organization:</td>
<td>Name of Anacostia Watershed Society Host:</td>
</tr>
</tbody>
</table>

**Self-Declaration**

1. (For those 5 years and older only)
   I attest that I am fully vaccinated per the CDC guidelines.
   *(Note: The Pfizer and Moderna vaccines are a two-dose series and Johnson & Johnson’s is a single-dose vaccine.)*
   - Yes ☐ No ☐

2. (For those 5 years and older only)
   I attest that I am up to date on my booster doses of the COVID-19 vaccine.
   *(Note: The Pfizer and Moderna vaccines are a two-dose series and Johnson & Johnson’s is a single-dose vaccine.)*
   - Yes ☐ No ☐

3. (For those under 5 years old only)
   I attest that I am under the age of 5 and am not eligible for a vaccination at this time.
   - Yes ☐ No ☐

4. I am not currently experiencing, or have experienced any flu-like symptoms and/or been sick in the last 10 days [such as fever, chills, cough, sore throat, respiratory illness, difficulty breathing, loss of taste or smell, etc.).
   - Yes ☐ No ☐

5. I have not had close contact with or cared for someone diagnosed with COVID-19 in the last 10 days.
   - Yes ☐ No ☐

If you have answered “no” to any of the above questions, participation in our event and/or access to our facilities will be denied.

**Signature and Date** (if participant/volunteer/staff over 18 years old):

______________________________________________________ ______

**Signature and Date** (if guardian for under 18 years old):

______________________________________________________ ______

*Note: The information collected on this form will be used to determine your access right to the Anacostia Watershed Society’s event and/or facilities. Any questions should be directed to your host.*

*Effective 03/01/2022*