

# EVENT ATTENDANCE SHEET

Event Name: \_\_\_\_\_

Date: \_\_\_\_\_

CHECK ONE OF THE BELOW

Print Name	Email address	Phone number	I attest that I am fully vaccinated. <sup>1</sup>	I do not wish to attest and will wear a mask. <sup>2</sup>	I do not wish to attest but have received a negative test. <sup>3</sup>	Signature
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**1** Fully-vaccinated means that at least two weeks have passed since receiving the second dose of a two-dose vaccine or the single dose of a one-dose vaccine.

**2** Agree to wear a mask at all times when indoors.

**3** Attest to having a negative test for COVID-19 via PCR within 72 hours before the start of the scheduled visit or via rapid antigen test within 8 hours before the start of the scheduled visit and be prepared to show proof of the negative test.