Southside Church of Christ COVID-19 Survey

As we prepare to open our worship service at the building, your wellbeing and safety are our highest priority. With growing concerns for COVID-19 (Coronavirus) it is important that we request you to share some information with us. This information will help to keep our members, guests, and fellow worshippers happy, safe and healthy. We will limit the number of worship attendees to 70. Please take your temperature prior to coming to service. If your temperature is above 100, you are sick or have some preexisting medical/health condition that would put you and others in harm's way. Stay at home. Our nurses will check your temperature and ask you the questions on this survey when you enter the building. Your cooperation is necessary and paramount in keeping yourself and others from being infected with COVID-19. Please, always wear your mask and maintain a social distance of 6 feet from other individuals and groups while in the building. Any social congregating is discouraged even in the parking lot upon exiting the building.

Please answer the following survey questions thoroughly and completely. Separate surveys are to be completed each week by each attendee/member attending worship in the building. Please try to arrive by 10:15 am for worship so we can get you checked in.

Have you or anyone you are caring for or contacted have experienced any of the following symptoms?

- 1. In the last 14 days have you traveled out of the state or country (by air, sea or land? Yes: No:
- 2. Have you been in contact with a COVID-19 positive person? Yes: No:
- 3. Have you or anyone you are in close contact with been diagnosed with COVID-19? Yes: _____ No: _____
- 4. In the last 14 days have you been admitted to the hospital or tested for COVID-19? Yes: No:
- 5. In the last 14 days have you experience any or all of the following?

 - a. Chills or Shaking Yes: ____ No: ____b. Congestion or runny nose Yes: ____ No: ____
 - c. Cough Yes: ____ No: ____
 - d. Fever of 100 or higher Yes: ____ No: ____
 - e. Headaches (new or unusual) Yes: ____No: ____
 - f. Loss of sense of smell or taste Yes: ____ No: ____
 - g. Malaise/Fatigue/Tiredness Yes: ____ No: ____
 - h. Muscle pain or body aches Yes: ____ No: ____
 - i. Shortness of breath Yes: ____ No: ____
 - Sore throat/Dry mouth (not caused by prescription medication(s) Yes: No: j.
 - k. Vomiting/Diarrhea/Nausea Yes: No:

If you answered Yes to any of these questions, DO NOT ATTEND church services at the building. Attend virtual worship in your home. We will help you get connected.

Please advise if you plan to attend our Morning Worship Service or On-line Virtual Worship Service.

Worship at Building Virtual Worship

 Name:
 Phone Number:

Email:

Thank you for your patience, cooperation and understanding while we safely re-open worship in the building. If you have questions or concerns, please direct them to the Elders.

Olabamiji Idowu, Kenneth McCoy, Herman Snoddy