

In an effort to reduce the risk of COVID-19 exposure to Exmoor Country Club all participants in the CWDGA Senior Better Ball or pairs must complete the following screening questions:

Date: September 24, 2020

Visitor's name:	Visitor's phone	e number:		
	Self-Declaration	n by Visitor		
			YES	
Have you tested positive with COVID-19 within the last 14 days?				
Have you experienced any cold or fl sore throat, loss of taste, diarrhea or other respiratory problem)?		, ,		
Have you had close contact with or cared for someone diagnosed with COVID-19 within the last 14 days?				
Visitors answering yes to any of the	above questions will not	be permitted access to Exn	noor's facility.	
Additional Declaration:  I will where a protective face mask winteracting with staff, and when social			oor, when	
Visitor signature:				
For internal use:				
Access to facility (circle one):	Approved	Denied		
Employee name:	Employee signature: _			

NO