



Blessed Trinity Shrine Retreat

COVID-19 Guest Health Screening Form

If you are sick, feeling sick, or have recently come in contact with someone who is sick, we encourage you to stay home. Please see our cancellation policy.

In the event that you contact COVID-19 within 14 days of attending a retreat or visiting the retreat center, please notify the Executive Director immediately.

Elisabeth Donner

Cell: 334-947-9557

Email: btsr.director@msbt.org

We require all guests to be fully vaccinated.

1. I am fully vaccinated. Yes No

Fully vaccinated means it has been at least 14 days since the last required dose of the COVID vaccine.

If you answer YES to any of the following questions, we respectfully request that you remain/return home.

Have you or anyone you've been in close contact with:

2. Been exposed to or confirmed diagnosis of COVID-19? Yes No

3. Have a fever over 100°F? Yes No

4. Have any respiratory symptoms? Yes No

Shortness of breath, difficulty breathing, cough, sore throat, headache, fatigue or muscle pain, new loss of smell, etc.

5. Have signs of gastrointestinal illness? Yes No

such as loss of appetite, diarrhea, vomiting, or abdominal pain

6. Have chills and/or repeated shaking with chills? Yes No

*Close contact is defined as:

- Within 6 feet of another person, AND
- For more than 10 minutes, AND
- Not wearing a mask

Guest Name, Printed

Date(s) of retreat/visit

Signature

Guardian Name if Minor

Guardian Signature