

COVID-19 Questions:

- 1. Do you or any of your close contacts have a fever, cough, sore throat, runny nose, new onset of aches and pains, headache, loss of sense of taste or smell, shortness of breath or any other symptoms suggestive of COVID-19?**
- 2. Are you or anyone from your household or bubble considered a close contact to a positive COVID case?**
- 3. Have you or any of your close contacts been mandated to self-isolate by public health?**
- 4. Have you or any of your close contacts travelled outside of Canada or outside our province within the last 14 days?**
- 5. Have you tested positive for COVID-19?**

You are permitted to enter Resurrection if you answer no to all questions.