

COVID-19 Drop-in Visitor Screening Form

We require all visitors to complete this screening form prior to entering our facilities. Your honest answers will help us keep everyone safe.

Collection of Personal Information

Personal information on this form is collected in accordance with the [Municipal Freedom of Information and Protection of Privacy Act](#). It is to be used for the purpose of administering health and safety precautions within municipal facilities. Any questions regarding the collection, use and retention of personal information on this form can be directed to the Town of St. Marys Clerk (clerksoffice@town.stmarys.on.ca).

Full name *

Phone number *

Date *

Time *

Which municipal facility are you visiting? *

Do you have any of the following **new or worsening** COVID-19 symptoms? (*Symptoms should not be chronic or related to other known causes or conditions.*)

Fever/chills; new cough or a cough that is getting worse; difficulty breathing or shortness of breath (even when sitting or walking regularly) *

Yes

No

Sore throat or runny/congested nose (not due to allergies); unusual level of fatigue or headache; nausea/vomiting, diarrhea or loss of appetite; feeling unwell for an unknown reason *

Yes

No

In the last 14 days, have you been in close contact with a positive COVID-19 case, returned from travel outside of Canada, or been advised to self-isolate by public health? *

Yes

No

If you answered **YES** to any of these questions, you are not permitted to enter this facility and should go home and self-isolate right away. Call your health care provider or Huron Perth Public Health's Health Line at 1-888-221-2133, ext. 3267 and a public health nurse will give you detailed instructions to follow to protect yourself, your family and members of the public.