

VENUE COVID-19 COMPLIANCE ATTESTATION: <u>required for entry into event</u> Last updated: 5/12/2021

Please complete and accept the following statement in order to participate as a guest at the following Lessing's	
proper	rty:,
for event date: To ensure the health and safety of all participants in this event, I hereby attest that:	
Υ	I have tested negative for COVID-19* and I have either physical or electronic proof of my negative test result OR I have completed the vaccination series** and have either physical or electronic proof of completion (IF APPLICABLE FOR THIS SIZE EVENT).
Υ	I have not been in close contact in the past 10 days with anyone who has tested positive for COVID-19 or who has or had symptoms of COVID-19.
Υ	I have not tested positive for COVID-19 in the past 10 days and/or experienced any symptoms of COVID-19. I have not had a temperature of greater than 100.0°F in the past 10 days.
Υ	I have not traveled without completing the COVID test requirements as set forth by New York State (if applicable).
Υ	I understand that I must comply with the following risk mitigation strategies:
	 Maintain a distance of at least 6 feet from other people whenever possible. Wear a face-covering whenever I am on a Lessing's property when I am not seated.
Either	2-19 TESTING REQUIREMENTS 1) a PCR test that has been collected within 72 hours of the event start time; or 2) a Rapid test within 6 hours of ent start time.
	CCINE SPECIFICATIONS: Hee must have been <u>FULLY</u> vaccinated more than 14 days before the date of event.
First N	ame: Last Name:
Date o	f Birth: Phone Number:
Addres	SS:

Email Address: