COVID-19 WARNING

Despite regular and thorough cleaning of all equipment, surfaces, and areas of the facility using disinfectant cleaning supplies, there is no possible way we can guarantee that our facility, or our members, are free of COVID-19.

While we are taking every precaution to ensure the safety of our clients, if you are willing to receive services from DOC, at Per4orm, you are willing to assume the risk of being in a facility with other people. We are asking that you take these everyday precautions:

 **Please do not enter the facility if you, or anyone you have been in contact with is sick, if you have been out of the country, or on a cruise in the last 14 days.**

**You must wear a face mask, or some type of cloth covering your nose and mouth the entire time you are in the facility.**

**Avoid touching your eyes, nose and mouth.**

**Clean your hands often before you get here, while you are here, and when you leave.**

By signing this document, you acknowledge you assessed the risk of being here, you are complying with the precautions listed above, and do not hold DOC, or Per4orm liable for potential exposure to COVID-19.

Date: \_\_\_\_\_\_\_\_\_\_\_

Client Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Client Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Client’s Guardian’s Name (If applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Client’s Guardian Signature (If applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_