Better Days Ahead LLC

Due to the 2019-2020 outbreak of the novel Coronavirus (COVID-19), our business is taking extra precautions with the care of every client to include health history review and enhanced sanitation/disinfecting procedures in compliance with CDC guidance.

Symptoms of COVID-19 include:

• Fever

• Fatigue

• Dry Cough

 • Difficulty Breathing

I agree to the following:

 • I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced the symptoms listed above within the last 14 days.

• I affirm that I, as well as all household members, have not been diagnosed with COVID-19 within the past 90 days.

• I affirm that I, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the past 30 days.

• I affirm that I, as well as all household members, have not traveled outside of the country or to any city considered to be a “hot spot” for COVID-19 infections within the past 30-days.

 • I understand that Better Days Ahead LLC cannot be held liable for any exposure to the COVID-19 virus caused by misinformation on this form or the health history provided by each client. Our business is following these enhanced procedures to prevent the spread of COVID-19:

* temperature check upon arrival
* hand sanitization section upon arrival
* cleaning and disinfecting before and after office use
* practicing social distancing (at least six feet)
* air purifier
* open windows to keep circulating the air.

By signing below, I agree to each statement above and release Better Days Ahead LLC from any and all liability for unintentional exposure or harm due to COVID-19.

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Name of Client

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Signature Date­­­­­­­­­­­