



TRAVEL ACTIVITY FORM INTO/THRU UNALAKLEET

Contact the Unalakleet Travel Coordinator at: (907) 310-1713 or travelunkpoc@gmail.com

FORM MUST BE SUBMITTED BEFORE ARRIVAL INTO UNALAKLEET

FINAL DESTINATION: _____ UNALAKLEET _____ REGIONAL VILLAGE

FULL NAME (PLEASE PRINT) _____

MINOR (YES) OR (NO) IF YES, PRINT NAME OF GUARDIAN: _____ AGE: _____

TRAVELING FROM: _____ HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE NO. _____

EMAIL: _____ TRAVEL DATE: _____

AIRLINE AND ARRIVAL TIME: _____

QUARANTINE LOCATION: _____

IS THE ENTIRE HOUSEHOLD PREPARED TO QUARANTINE: _____

PLEASE CHOOSE ONE – PURPOSE OF TRAVEL:

_____ MEDICAL _____ ESSENTIAL SERVICES _____ CRITICAL INFRASTRUCTURE WORK
_____ CRITICAL PERSONAL NEEDS _____ SUBSISTENCE PURPOSES

PLEASE CHOOSE ONE – TRAVELING FROM:

_____ IN-STATE TRAVEL _____ OUT OF STATE TRAVEL _____ INTERNATIONAL TRAVEL

BUSINESS/ORGANIZATION:

All travelers, 12 years of age and older (by air, land or water) must get a COVID-19 test done within 72 hours of traveling into Unalakleet and provide proof of a negative result. Upon Arrival into Unalakleet, you will go directly and immediately into quarantine. If you are quarantining in a household with multiple people, the entire household is required to quarantine. Failure to follow through on quarantine requirements will result in a municipal infraction.

Quarantine lasts for 14 days and involves staying at home, no visiting other households and accepting visitors into your quarantined home. You can go out into the country with the family you are in quarantine with. Essential workers, if your employer requires you to work while on quarantine, you should be wearing a mask, working alone and not in close contact with others. Your household is considered to be on quarantine if you are doing an essential job. The Unalakleet Tri Org recommends that you post a sign on your door acknowledging that your household is on quarantine.

By signing this form: I swear or affirm, under penalty or perjury, that: the above information I provided on this document is true and correct. I swear I will comply with the requirements of the City of Unalakleet, the requirements of my employers protective plan (if applicable), and this travel activity form.

WARNING: Travelers that do not adhere to this signed agreement of a mandatory quarantine will be issued a: 1st fine of \$250 2nd fine of \$500 3rd fine of \$750 4th fine of \$1000. Failure or refusal to fill out this Unalakleet Travel Activity Form may result in a fine of up to \$500.

Signature _____ Date: _____