Have you had a fever (temperature 100.4 F or greater) or felt feverish or had chills in the last 24 hours?
- YES
- NO

Have you had close contact with someone diagnosed with COVID-19 or been notified that you may have been exposed to it within the past 14 days?
- YES
- NO

Have you traveled anywhere in the past 24 hours that would require you to quarantine?
- YES
- NO

Have you attended a gathering with more than 25 people in which universal masking and 6 feet of physical distancing requirements were not enforced within the past 14 days?
- YES
- NO