



## Statement of Symptoms and Quarantine

Pursuant to the Governor of New Hampshire's Emergency Order 27, all registered guests must attest that they are exhibiting no symptoms of COVID-19.

### **Symptoms Statement (Required by all guests)**

By signing this statement I, \_\_\_\_\_ (print name) **attest that no one in my party is currently exhibiting any symptoms of COVID-19 such as:**

- 1. Fever in the last 48 hours**
- 2. Respiratory symptoms such as sore throat, cough, or shortness of breath**
- 3. Flu-like symptoms such as muscle aches, chills, and severe fatigue**
- 4. Changes in a person's sense of taste or smell**

Name: \_\_\_\_\_ (print name)

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