

Customer Health Screening Questions

We are **honored you are choosing to dine with us.** Before you enter, please ensure you can answer **NO** to each of the following questions.

1. Do you have any of the following symptoms?

- Yes No **A.** Fever of 100.4 degrees or higher (as measured by a touchless thermometer if available, but a verbal confirmation of lack of fever is sufficient if a touchless thermometer is not available)?
- Yes No **B.** Cough (excluding chronic cough due to a known medical reason other than COVID-19)?
- Yes No **C.** Shortness of breath?
- Yes No **D.** Sore throat?
- Yes No **E.** Diarrhea (excluding diarrhea due to a known medical reason other than COVID-19)?

2. Have you had or have you been notified that you have had close contact with a person that has been diagnosed with COVID-19 through a positive test result?

- Yes No

3. Have you traveled internationally or domestically (i.e. air travel or cruise) within the last 14 days?

- Yes No

If you answered YES to any of the following questions, please call _____ and we will prepare a takeout meal while you wait in your car.

Please note: We are practicing all preventive measures to stop the spread of COVID-19, including guidance from the CDC, FDA, EPA, the State of Michigan, and our local health department. Despite all of our efforts, you are entering a public facility at your own risk.



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