



750 West Main St.
Lancaster, TX 75146

Church: (496) 272-6776
Email: pward@dwccc.org

Website: www.dwccc.org

COVID-19 Pandemic Worship Consent Form

I _____ knowingly and willingly consent to gather in worship at Destiny Worship Center, 750 West Main Street, Lancaster, TX 75154.

In case I need to be contacted my phone or email is: _____

_____ I understand the COVID-19 virus has a long incubation period during which carriers of the virus may not show symptoms and still be highly contagious.

_____ I confirm that I am not presenting any of the following symptoms of COVID-19 listed below:

- Fever/Chills
- Shortness of breath/Difficulty Breathing
- Loss of sense of taste or smell
- Dry cough/Sore throat
- Diarrhea/Nausea/Vomiting
- Muscle/Body Aches/Headaches

_____ I confirm that I have not been around anyone with these symptoms in the past 14 days.

_____ I do not live with anyone that is sick or quarantined.

_____ To prevent the spread of contagious viruses and to help protect each other, I understand that I will have to follow the church guidelines, i.e., wearing a facemask before entering the doors of the church and while the assembly is gathered during Worship and social distancing.

_____ I understand that air travel significantly increases my risk of contracting my risk and transmitting the COVID-19 virus. I understand the CDC, OSHA and state of Texas recommend social distancing of at least 3-6 feet apart.

_____ I verify that I have not traveled outside the United States in the past 14 days to countries that have been affected by COVID-19 (if so, I understand I need to quarantine).

Signature _____

Date _____