Thank you for considering this in-person program.

When you register for this program we require and collect for the names and emails of any guests for whom you may also be purchasing tickets.

On the day of the Walk/Hike

- 1. When you arrive at the start location check in with the tour rep.
- 2. Dress appropriately for outdoor weather, including comfortable walking or hiking shoes depending on the program in which you have registered.
- 3. In the case of inclement weather, a determination to cancel will be made based on safety. Any cancellations will be communicated to you via email.
- 4. Since we will be starting out at dawn for some programs, we recommend you bring a flashlight or headlamp, as well as water and snack.

COVID Precautions Required for this Walk/Hike

- 1. All participants will be required to wear an appropriate face covering while with the group and adhere to the social distancing guidelines of 6ft. between all unrelated participants.
- 2. On the day of the walk/hike all participants must <u>complete a self-health questionnaire</u> prior to joining the group.

You will receive an email approximately 48 hours before the program asking you to acknowledge that you have read and understand these guidelines and agree to administer the self-health questionnaire prior to joining the group. Please keep an eye out for this email.



Self-Health Questionnaire

We look forward to welcoming you to this upcoming program. Help us protect our fellow participants and staff by conducting this self-check of health on the morning of the hike prior to joining the group.

- 1. Have you had any of the following **new** or **unusual-for-you** symptoms within the past 72 hours?
 - Fever of 100.4 degrees or above, or possible fever-like symptoms such as alternating chills and sweating
 - Frequent cough (not a chronic cough or your normal seasonal allergies)
 - o Trouble breathing, shortness of breath, or severe wheezing
 - Muscle or body aches that are not exercise related
 - Sore throat
 - New loss of smell or taste
 - Headache
- 2. Have you or anyone in your household or group tested positive or are awaiting test results for COVID-19?
- 3. Do you or anyone in your household or group have the symptoms of COVID-19 as listed above?
- 4. Are you currently subject to a stay-at-home order from your doctor or state or local requirements to quarantine, isolate, or stay at home?

If you answered "yes" to any of these questions, please stay home to protect our community.

