



# COVID-19

## SCREENING QUESTIONS

**BEFORE you enter the gym, please ask yourself these questions:**

**In the last 14 days, have you:**

- Been in close contact or cared for someone with a confirmed case of COVID-19?

**Since your last day of work OR since your last visit to Liberty, have you had any of the following:**

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

**Have you been directed to be under quarantine by any Public Health Agency or Primary Care Provider?**

**If you are a Liberty Employee, and answer YES to any of these questions, DO NOT ENTER THE FACILITY. Call your supervisor.**

**If you are a Liberty Customer, and answer YES to any of these questions, DO NOT ENTER THE FACILITY. Seek advice from your Healthcare Provider.**

**If you have answered NO, to all of these questions, please enter Liberty and continue to follow all social distancing, hand hygiene, and other COVID-19 defenses.**