

Covid-19 Guest Check in Questionnaire

Pursuant to Governor Sununu's Emergency Order 27, all guests must attest they are not exhibiting symptoms of Covid19. Additionally, guests must either provide a NH Driver's License as proof of residency, or for out-of-state, attest they have practiced safe measures for at least 14 days by observing social distancing and wearing face masks when around people who live outside of your home.

*****If you feel that you have been risk, we ask that you join us at another time. We will issue you a refund in a timely manner ******

I am a New Hampshire State Resident (Yes / No) NH DL# _____

If you are not a New Hampshire State Resident:

I affirm that I have observed safe social practices, for 14 days prior to traveling to Colby Hill Inn (Yes/ No) State ID _____

Symptoms Statement (All Guests): By signing this statement, I attest that no one in my party has experienced any of the following Covid19 items:

- a. Have you been in close contact with a confirmed case of COVID-19? (Yes / No)
- b. Are you experiencing a cough, shortness of breath or sore throat? (Yes / No)
- c. Have you had a fever in the last 48 hours? (Yes / No)
- d. Have you had changes in your sense of taste or smell? (Yes / No)

I also agree to abide by strict social distancing standards:

- Face masks shall be worn when entering the lobby and at all time in common areas.
- All parlor areas within the Inn are closed so that there is no congregating within these areas, in the lobby or at the bar. Gather as needed in any of our lovely outdoor spaces.
- We ask that you kindly respect other guests and staff by maintaining proper social distance of 6 feet at all times.

Name _____ Date Signed _____

Signature _____ Phone _____

Reservation Date: _____ to: _____ Received by: _____

Thank you for your cooperation! A Copy of this Questionnaire will be kept on file should the need arise and will be given to the NHDHS and State of New Hampshire.

Your hosts, Bruce Barnes & Jefferson Brechbühl