Community of Christ

Congregation Name:_____ Date:_____

Please list all in attendance of today's worship. **DO NOT PASS THIS LIST FROM PERSON TO PERSON** to gather this information. Please ask the individual for this information and record it yourself while maintaining 6 feet of physical distance. Please keep this list in a safe location until further notice. If there is a positive case of COVID-19 this list will be used for contact tracing. It may also be helpful to take a picture of those in the congregation from the front if all members are comfortable with it.

******THIS INFORMATION IS TO REMAIN CONFIDENTIAL******

Name	Address	Phone Number	Email Address