Health Screening Questionnaire

In an effort to reduce the risk of COVID-19 exposure to Keesal, Young & Logan's employees, all visitors must complete the following screening questions:

ALL GUESTS MUST BE VACCINATED IN ORDER TO ATTEND EVENTS AT KEESAL, YOUNG & LOGAN

Date:				
Visitor's name:	Visitor's phone number:			
Person/Employee visiting:				
Self-Declaration by Visitor				
		YES	NO	
Have you been fully vaccinated for COVID-19?				
Have you received a confirmed diagnosis of coronavirus (COVID-19) by a coronavirus (COVID-19) test or by a health care provider in the past 10 days?				
Have you experienced any of the following COVID-19 symptoms in the last 10 days (fever, nausea, vomiting, diarrhea, chills, muscle or body aches, sore throat, new loss of taste or smell, new cough, shortness of breath or other respiratory problem)?				
Visitors answering yes to any of the last two quoffices.	uestions will not be permitted acce	ess to Keesa	ıl, Young & Logan's	
Æ Visitor signature:				
For internal use: Access to facility (check one): Approved	Denied			
KYL Employee name:	KYL Employee signature:			

Notice at Collection of Personal Information Visitors

Keesal, Young & Logan collects personal information from you when you visit our premises. We want you to understand the categories of personal information we collect and the purpose for which it will be used. We do not sell your personal information. If you have any questions, please refer to our Privacy Policy, which is accessible at https://www.kyl.com/privacy-policy/ or contact our Executive Director, Marilyn Whitcomb at (562) 436-2000 or via email at Marilyn.whitcomb@kyl.com.

Categories of Personal Information We Collect	What We Do With It	
Identifiers such as your name and contact information.	We use this information to identify you and to communicate with you.	
Photographic images from security cameras in and around our building and parking structure.	We use this information to maintain the safety and security of our premises.	
Medical information, such as your responses to health screening questions and/or whether you have received a COVID-19 vaccination.	We use this information to maintain a safe environment and to evaluate the risk that an individual's presence may pose to others as a result of the COVID-19 virus. In the event of a COVID-19 outbreak, we may report this information to appropriate health authorities.	

^{*}KYL is not a covered entity under the Health Insurance Portability and Accountability Act of 1996 (HIPAA).