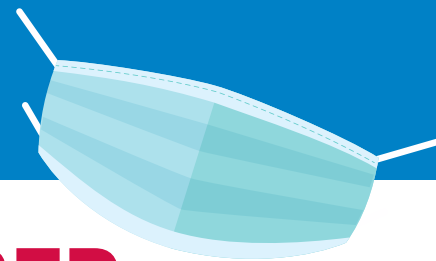
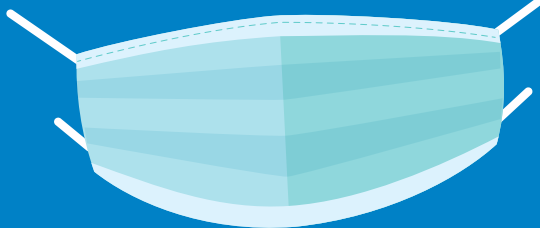


MAXIMUM CAPACITY

PEOPLE



MASKS ARE REQUIRED

IN COMPLIANCE WITH PROVINCIAL GOVERNMENT'S HEALTH ORDER

**THANK YOU
FOR HELPING US ALL STAY SAFE**

PROVIDED BY

CFIB

**CANADIAN FEDERATION
OF INDEPENDENT BUSINESS.**

Covid Screening Questions

1. Do you have any one of the COVID-19 symptoms below?

<ul style="list-style-type: none">• fever and/or chills• cough or barking cough (croup)• shortness of breath• sore throat• difficulty swallowing• decrease or loss of smell or taste• runny or stuffy/congested nose• headache• nausea/vomiting, diarrhea• muscle aches• extreme tiredness	<ul style="list-style-type: none">• pink eye (for adults)• stomach pain (for adults)• falling down often (for older adults)
--	---

2. Has a doctor, health care provider, or public health unit told you that you should currently be isolating (staying at home)?

3. Have you been identified as a "close contact" of someone who currently has COVID-19 in the last 14 days?

4. Have you received a COVID Alert exposure notification on your cell phone in the last 14 days (and have not been tested or waiting for your result)?

5. Have you traveled outside of Canada in the last 14 days?*

* Not applicable if you are exempted from federal quarantine as per the *Quarantine Act*.

If you answer YES to any one of the questions above, PLEASE DO NOT enter this location AND contact either your health care provider or Telehealth Ontario (1-866-797-0000) to get advice or an assessment, including if you need a COVID-19 test.