**ACC NCR COVID-19 ATTENDEE ATTESTATION for IN-PERSON Events (as of March 28, 2022)**

ACC NCR is hosting this event in accordance with its ACC NCR COVID-19 Guidelines for In-Person Events (“Guidelines”). Pursuant to the Guidelines, all events hosted by ACC NCR will be governed by the ACC NCR Duty of Care (“Duty of Care”). By registering for or attending an ACC NCR in-person event, participants (including members, speakers, sponsors, and ACC NCR staff) agree to comply with the Duty of Care and must attest to the following:

**\_\_\_** I recognize and accept there is inherent risk involved in attending in-person events.

**\_\_\_** I am fully vaccinated, meaning that (i) at least two weeks have passed prior to the event since I received either (a) one dose of the Johnson & Johnson vaccine or (b) a second dose of the Pfizer or Moderna vaccines **and** (ii) if at least seven months have passed since the occasion of (i)(a) or (i)(b), as applicable, that I have received an FDA authorized booster.

**\_\_\_** I will not attend the event if I am experiencing, or during the 10-day period immediately preceding the event have experienced, symptoms associated with the flu or COVID-19 unless I have been medically cleared by my healthcare provider or I satisfy the relevant guidelines promulgated by the CDC, state or local public health authorities that apply to quarantine and isolation (such as the [CDC Guidelines](https://urldefense.com/v3/__https:/www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html__;!!EmXWOUHo7x8!YAunuSSmNWDODQ2LHOP4FqDOZjQNudlZSbZfjT7Qkr-DcPxkk-eVy2ueGqdpDFgnTfpgcp1-Gw$)).

**\_\_\_** I will not attend if during the 10-day period immediately preceding the event (i) I believe that I may have been exposed to a confirmed or suspected case of COVID-19 or (ii) I have been diagnosed with COVID-19 and am not yet cleared as non-contagious by my healthcare provider or I satisfy the relevant guidelines promulgated by the CDC, state or local public health authorities that apply to quarantine and isolation (such as the [CDC Guidelines](https://urldefense.com/v3/__https:/www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html__;!!EmXWOUHo7x8!YAunuSSmNWDODQ2LHOP4FqDOZjQNudlZSbZfjT7Qkr-DcPxkk-eVy2ueGqdpDFgnTfpgcp1-Gw$)).

**\_\_\_** I will self-monitor for signs and symptoms of COVID-19. If I experience symptoms of COVID-19 within 10 days after attending the event, I agree to test for COVID-19 and promptly report positive results to ACC NCR at [covid@accnationalcapitalregion.com](mailto:covid@accnationalcapitalregion.com).

**\_\_\_** I will regularly self-monitor for cold, flu, or COVID-19 symptoms while at the event. If I begin experiencing any symptoms, I will promptly leave the event space and notify ACC NCR staff if I learn that I may have exposed others to COVID-19 while attending.

**\_\_\_** I will comply with the Duty of Care during the event, including:

* wearing a mask (over my nose and mouth) when indoors and not actively eating or drinking (masks are not required for outdoor activities),
* adhering to spacing recommendations, and
* sanitizing hands as recommended.

**Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***\*\*We are a profession subject to ethical obligations and a community committed to the well-being of its members. As such, we expect all attendees will respect and abide by these requirements for their own safety and the safety of other attendees.\*\****