

POSEY SALON

COVID-19 CONTACT & RELEASE FORM

Have you had a new or worsening cough?

Yes No

Have you had a fever?

Yes No

Have you had shortness of breath?

Yes No

Have you been in close contact with anyone with these symptoms or anyone who has been diagnosed with COVID-19 in the past 14 days?

Yes No

If you answer "Yes" to any of the above questions we will reschedule when your symptoms (cough, fever and shortness of breath) have been resolved, and fever has been resolved without medication for at least 72 hours, or at least 14 days after contact with a person sick with cough, fever, or diagnosed COVID-19.

By filling out the form below and submitting, you agree to comply with the listed requirements and agree that you are at the salon at your own risk, releasing Posey Salon from any liability relating to COVID-19. Failure to comply with these written instructions or verbal instructions from staff may result in your removal from the premises.



Please wait outside for your appointment.
Contact your stylist by call/text upon arrival and we'll advise when okay to enter salon.



Please wear a face covering at all times.
Let's keep each other safe.



Complete sign in form.
We're required to collect your contact information.



Please wash your hands for 20 seconds.
Your safety is our priority!



Flatten the curve, come alone.
Don't bring children or others to your appointment.



Walk-ins temporarily not accepted.
Please call for an appointment.



Practice social distancing at all times.
Please stay 6 feet apart.



Please do not touch retail products.
Need products? Please ask your stylist.



We love you, but we can't hug you!
Let's stay safe together.

First Name _____ Last Name _____

Date of Appointment _____ Time of Appointment _____

Phone _____

Email _____

Address _____

City _____ State _____ Zip _____

I verify that I understand this information and all information provided is valid,

Signature _____