



Small Group Gathering Agreement

Group Name: _____ Group Leader: _____

Group Leader Contact info: _____

Meeting Day/Date/Time/Location: _____

While at Unity Church of the Hills (UCOH):

I agree to limit the size of our indoor group gathering to the capacity limit for the room we use.
(Sanctuary 25, Friendship Hall 10, Chapel 6, Legacy Suite 10)

I understand the opportunity for gathering at UCOH may change in accordance with state, county or city guidelines.

When indoors, I agree to avoid the Wee Wisdom section of the hallway at all times. In addition, I agree to avoid the Pavilion, playground and the walkways in between, during arrival and departure when Wee Wisdom School is in session and open (Mondays-Thursdays, 8:30am-9:15am and 1:00-1:30pm; check with office to verify dates in session).

I agree to comply with the following health and safety guidelines while indoors at UCOH:

- Mask wearing at all times while indoors (except when alone or eating/drinking)
- Mask wearing outdoors whenever unable to consistently maintain separation of at least 6 feet
- Proper physical distancing (stay 6 feet apart, no physical contact)
- Use of hand sanitizer upon arrival and departure, and after restroom use
- Wipe down chairs with sanitizer before and after use

I agree to notify the Church immediately if I test positive for COVID-19. I understand if someone from the group tests positive, then our group’s list of names will be turned over to the local health department for contact tracing.

I choose to participate in this small group gathering of my own volition and accept the risk of gathering in person.

1. Printed Name: _____ Signature: _____ Date: _____
2. Printed Name: _____ Signature: _____ Date: _____
3. Printed Name: _____ Signature: _____ Date: _____
4. Printed Name: _____ Signature: _____ Date: _____
5. Printed Name: _____ Signature: _____ Date: _____
6. Printed Name: _____ Signature: _____ Date: _____
7. Printed Name: _____ Signature: _____ Date: _____
8. Printed Name: _____ Signature: _____ Date: _____
9. Printed Name: _____ Signature: _____ Date: _____
10. Printed Name: _____ Signature: _____ Date: _____