



In-Home Visitor for Independent Living Resident

PLEASE PRINT LEGIBLY. Complete information for **ALL non-resident visitors** you plan to welcome into your home. As a reminder, visitors are not allowed in ANY campus area, other than your apartment or cottage. **Return this completed form to the front desk by noon on the business day preceding visitation. We cannot schedule a visit without this completed form.**

Visitor 1 Name _____

Street _____ City _____ State _____ ZIP _____

Phone Numbers (C) _____ (H) _____

Email Address _____

Date(s) of Visit (No overnight stays permitted) _____

Mode of Transportation to Arrive at Carolina Village (Mark all the apply):

☐Automobile ☐Airplane ☐Train ☐Bus ☐Other

Is this person coming from someplace other than their address above? If so, please explain.

Visitor 2 Name _____

Street _____ City _____ State _____ ZIP _____

Phone Numbers (C) _____ (H) _____

Email Address _____

Date(s) of Visit (No overnight stays permitted) _____

Mode of Transportation to Arrive at Carolina Village (Mark all the apply):

☐Automobile ☐Airplane ☐Train ☐Bus ☐Other

Is this person coming from someplace other than their address above? If so, please explain.

If additional space is needed, please attach additional sheet(s).

RESIDENT AGREEMENT

I understand that:

- (a) There is an inherent risk that I or another Carolina Village community member could be exposed to the COVID-19 virus from any guests that I invite onto campus;
- (b) Although Carolina Village staff members take precautions to minimize the risk of virus transfer, my guest(s) and I are also responsible for minimizing risk of COVID-19 transmission by following established protocols and best practices. Carolina Village is not responsible for any COVID-19 transmission that may occur;
- (c) If I were to contract the COVID-19 virus I could become ill and possibly die. I agree that I am knowingly and voluntarily assuming all risk to myself, known and unknown, associated with the potential exposure to the COVID-19 virus; and
- (d) Any of my visitors must sign and agree to the Visitor Informed Consent & Assumption of Risk form in order to visit. Others will be turned away; and
- (e) **My visitors are NOT permitted in ANY common area, except elevators and in traveling between my home and the parking lot.** Guests should use the shortest distance between these locations to enter and exit the building. Common areas, including hallway common spaces next to laundry rooms, are closed. To keep enclosed spaces as safe as possible, elevator use is restricted to those who live in or are visiting the same household; and
- (f) I understand that I should wear a mask and be at least 6' socially distanced from others; and
- (g) I am aware that my name and the name(s) of my guest(s) may be given to public health officials for contact tracing, which could result in public health officials asking me or my visitor(s) to be tested for COVID-19 should new cases develop at Carolina Village. **It is my responsibility to inform Carolina Village of any symptoms or illness myself or my visitor(s) experience up to 14 days after last contact.**

I AGREE TO FOLLOW ALL CAROLINA VILLAGE INFECTION CONTROL PROTOCOLS, INCLUDING WEARING PERSONAL PROTECTIVE EQUIPMENT, MAINTAINING SOCIAL DISTANCING OF AT LEAST 6 FEET, SANITIZING MY HOME FOLLOWING ANY VISITORS, ETC. I UNDERSTAND THAT MY FAILURE TO DO SO COULD RESULT IN VISITATIONS BEING LIMITED OR REFUSED.

Resident Signature _____ Date _____

Resident 2 Signature (if applicable) _____ Date _____