



## Craig Tribal Association Agreement Contract

This agreement contract between the Craig Tribal Association and \_\_\_\_\_

starts on \_\_\_\_\_ 20\_\_\_\_.

Please read and initial below.

\_\_\_\_\_ I understand that I am required to wear a mask in the hallway of the quarantine facility, to help reduce spread to others.

\_\_\_\_\_ I understand all information given to Craig Tribal Association by myself or health professionals will be for Craig Tribal Association's records only and kept completely confidential.

\_\_\_\_\_ I understand that drugs, alcohol and vaping are not permitted inside the building at any time, or within 100ft of any entrance.

\_\_\_\_\_ I understand that any damage to any Craig Tribal Association property will be my financial responsibility to pay Craig Tribal Association for either repairs or replacement.

\_\_\_\_\_ I understand that the sole purpose of these rooms is to prevent coronavirus (COVID-19) from spreading within our community and island.

\_\_\_\_\_ I understand that I can leave the quarantine facility at any time, however I am aware I could forfeit my stay at the quarantine facility if I leave for any other reason than a medical appointment.

\_\_\_\_\_ I understand that Craig Tribal Association recommends following the CDC guidelines. Craig Tribal Association also recommends following Public Health's recommendation on staying in quarantined until the date given.

By signing this contract, I understand that I agree and adhere to all protocols and policies given to me.

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Occupants printed name and signature

Date