

SafeMendocino Guest Agreement

Name(s) _____

Cell phone _____ Email _____

Check in: _____ Check out: _____

Cabin: _____

- If I have been ill with any symptoms associated with COVID19 or if I know that I have been exposed to COVID19 within 14 days of my scheduled trip, I will cancel my reservation without penalties.
- I will honor all guidelines as outlined in the property's Safe Business Operations Protocol, including maintaining a distance of 6 feet from all people, wearing a mask whenever outside of my room within 6 feet of another person or inside a building, and using hand sanitizer or washing hands frequently, especially upon entering and exiting a building and after sneezing, coughing, or touching my face.
- I will alert management immediately if I become sick during my stay.
- I understand that if I become sick and test positive for COVID-19 during my stay, the county will require me to self-isolate on the Lord's Land for a period of fourteen days at my own expense. Furthermore, if I am traveling with family members or travel companions who are not sick, they will need to occupy an additional cabin, for the same duration, at my own expense. I agree to cooperate and comply with any contact tracing requests from the County of Mendocino.

Guest Signature(s): _____

Date: _____



#SafeMendocino