COVID-19 EVENT PLANNING TEMPLATE

In accordance with Governor Herbert's Executive Order, event size can exceed 50 individuals if organizational oversight can be provided that ensures guidelines are followed. Formal organizations are required to complete the following event management template to assist their efforts to plan a safe event. This document must be kept and available for inspection by the local health officer or their designee.

Event Details:				
Event Name:				
Event Location:	Address	City Zip		
	Address			
Party Responsible fo Organizational Oversight:	Address	City Zip		
Oversigne.	Email Address	Phone		
Event Dates:	Start Date	End Date		
Anticipated Number				
of Attendees:	Per Day Total	Grand Total		
Event Type	 Static: events where the attendees primarily enter, watch and depart Interactive: events where attendees create a traffic flow and interact with each other Participant: events where attendees primarily participate in an activity or production Community: events with many activities and populations centers and likely a random traffic pattern 			
Employees, Volunteers, Players, Performers, Actors, Etc.				
Checklist:	 Symptom checking symptoms checked (checklist or verbal), including temperature checks when feasible Face coverings are worn in settings where other social distancing measures are difficult to maintain Ensure that face coverings are available 	 □ Provide accommodations to high-risk employees & volunteers; minimize face-to-face contact, assign tasks that allow these individuals to maintain a 6-foot distance from other employees or customer □ Comply with distancing and hygiene guidelines 		

Tracking Attendance: Must have the ability to track attendance, please describe your plan to track attendance to support contract tracing.		
Social Distancing A 6-foot distance must be maintained between household groups at all times including while seated, limiting the number of people in a confined area to enable adequate distancing at all times, and congregating at any point is not allowed. Please describe your plan to maintain appropriate social distancing throughout the event.		

High-Risk Attendees			
Set an established window time for high-risk groups to come in without pressure from crowds and/or separate			
entrances and queues, please describe your plan to accommodate high-risk attendees.			
Signage			
Maintain signage to remind and help individuals stand or sit at least 6 feet apart, please describe your plan to			
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Payment Options Encourage contactless payment; disinfect between transactions at facility stores/gift shops and comply with other retail recommendations, please describe your plan for payment.
Hygiene & Sanitization Dedicated staff for sanitizing high-touch areas, please describe your plan to provide hygiene and regular sanitization throughout the event.

Concessions				
Checklist:	 □ Serving and seating protocols consistent with <u>restaurant</u> <u>guidance</u> □ Any concessions/restaurant seating is compliant with <u>restaurant dine-in guidance</u> 	 Encourage contactless payment To the extent reasonable, serve grab-and-go food items Maintain 6-foot distancing for all lines 		
Additional Safegu	uards			
Please share any additional planned safeguards or measures being enacted at the event.				
Signature				
Please provide the signature of the organizational representative that will be responsible for ensuring event oversight.				
	Printed Name	Title		
	Signatura	Data		
	Signature	Date		