



Farmers' Market Vendors Screening Questionnaire 2020 Season

COVID-19 has presented critical health challenges to our society and as farmers' market vendors we must adapt our market operations to protect customers, staff and ourselves. Farmers' Markets and vendors are considered individual places of business. Therefore, pre-COVID-19 guidelines have been amended to reflect updated AHS regulations.

As we adhere to section four of [CMOH Order 25-2020](#), to prevent the risk of transmission among vendors and our customers, it is strongly recommended that each vendor and market staff member complete the screening questionnaire prior to engaging in any activity at the site.

The intention of this document is to have each vendor that attends your market complete the declaration ONCE. That signed declaration will be kept on file by the market, and will cover the whole market season, or until the requirements from AHS change. This will put the responsibility back onto the vendor to ensure that they and their staff meet the requirements for each market that they attend. It is important that they realize that screening and keeping records is necessary in the event that someone does test positive, and contact tracing needs to be done.

This is a market specific version of the [Alberta Government's Health Daily Checklist](#).

To ensure everyone's safety, each vendor is asked to:

1. screen themselves and all staff members prior to arrival on market days,
2. keep track of what persons worked onsite and when

If any of the questions below are answered yes, by you or your staff, that individual is not permitted to use, volunteer or work at the market facility.

Please note: Non-compliance could result in your removal from a market, vendor and/or market fines and market closures. As Covid recommendations change rapidly it is both manager's and vendor's responsibility to make sure that all health recommendations are being met.



1 Do you have any of the below symptoms:

- | | | |
|--|-----|----|
| • Fever (greater than 38.0C) | YES | NO |
| • Cough | YES | NO |
| • Shortness of Breath / Difficulty Breathing | YES | NO |
| • Sore throat | YES | NO |
| • Runny Nose | YES | NO |

2 Have you, or anyone in your household travelled outside of Canada in the last 14 days?

YES NO

3 Have you, or anyone in your household been in contact in the last 14 days with someone who is being investigated or confirmed to be a case of COVID-19?

YES NO

4 Are you currently being investigated as a suspect case of COVID-19?

YES NO

5 Have you tested positive for COVID-19 within the last 10 days?

YES NO

I, _____, agree to ensure that I and any staff that operate my market space in the _____ Farmers' Market at the _____, have answered no to the above questions prior to each market day. Should any member of my business display any symptoms or test positive for the virus, I will inform the Market Manager immediately.

Should a market be missed due to exhibiting the above symptoms, I/we will not return to the Farmers' Market until: I/we are symptom free for 14 days and/or can provide a recent negative test result.

Signature: _____

Date: _____