

**Event Plan form for Social Gatherings**

Type of Social Gathering: \_\_\_\_\_

Submitter Name: \_\_\_\_\_

Social Gathering Location: \_\_\_\_\_

Date/Dates: \_\_\_\_\_

Organizer/Sponsor: \_\_\_\_\_

Phone:(\_\_\_\_)\_\_\_\_\_ Fax: (\_\_\_\_)\_\_\_\_\_

Email: \_\_\_\_\_

Supply the following information and submitted to the Ripley County Health Department **14** business days prior to event for approval with Covid-19 Event Requirements. Plans must be detailed to ensure guests are informed to stay home if sick, part of the vulnerable population, have recently traveled to a known COVID-19 problem area **as well if have had recent contact with a presumptive COVID-19 positive or confirmed COVID-19 positive.** If the proposed venue hosting your event has multi-use rooms an intended floor plan must be submitted.

Capacity: What is the capacity of the venue?

\_\_\_\_\_

Guest Information: Signage and tools to make guests aware of Covid-19 precautions?

\_\_\_\_\_

\_\_\_\_\_

Staff and Volunteer Screening: Measures that will be taken to screen staff and volunteers for Covid-19 symptoms?

\_\_\_\_\_

\_\_\_\_\_

Social Distancing Measures: Identify measures to ensure attendees will practice social distancing?

\_\_\_\_\_

\_\_\_\_\_

Increased Sanitation: Steps that will be taken to ensure event space is clean and sanitized?

\_\_\_\_\_

\_\_\_\_\_

How will face coverings be enforced? **Per IN Executive order 20-37, face coverings are required.**

\_\_\_\_\_

Will all staff /volunteers be trained to monitor the event and assure compliance? Yes \_\_\_No\_\_\_

Compliance contact person? \_\_\_\_\_

**Ripley County Health Department is required to be notified if the approved event is altered or cancelled. Plans shall be submitted 14 business days prior to the event to Ripley County Health Department. Failure to submit an event plan form before the required 14 day's will result in your plan potentially not being approved.**