



WSU Extension Proposal for In-Person Activity

Washington State University Extension holds the health and safety of personnel, volunteers, the public, and that of program participants of critical importance. By following the guidelines laid out by the Governor's office and the Washington State Department of Health, as well as best practices outlined by the Centers for Disease Control (CDC), we hope to offer opportunities for participants to interact in person when appropriate.

This form should be completed and submitted for approval prior to holding any in-person activities or events. Please turn the completed form in to your County Director at least 10 days prior to your proposed activity or event.

Event Title:		
LOGISTICS		
Date:	Time:	Duration:
Is this event recurring? If yes, indicate how frequently:		
Event location (venue, address, detailed description of space):		
Anticipated Number of Adults Attending (including self; include names if known). No more than five individuals outside a household may meet in regional phases 1 and 2.		
Anticipated Number of Youth Attending (include names if known). No more than five individuals outside a household may meet in regional phases 1 and 2, not including Extension participants.		
Date of Virtual Planning Meeting and agenda:		
REASONING		
Rationale for the need to meet in-person:		
Please list your goals and outputs for this event: Goals: Outputs:		

COVID LOGISTICS	
How will you ensure 6-foot distancing between participants (describe the space, markers, arrangement, etc.)?	
Markers will be placed 6-feet apart for lines and other waiting areas. Indoor areas will be well-ventilated and provide enough space between people. People from the same household can be in groups together but will still be 6 feet away from other families. Gestures that promote close contact, i.e, hand shakes, hugs, elbow bumps, will be discouraged.	
How will you ensure face coverings are worn properly, hand hygiene is maintained, and health screenings/attestations are completed?	
All attendees will wear masks in a way that covers both their nose and mouth. Hand sanitizer will be made available to all attendees. All attendees will verbally attest that they have not displayed any symptoms of COVID-19 (cough, fever, shortness of breath, loss of taste or smell, etc.) in the last 14 days. Any attendees showing symptoms will be asked to leave.	
How will you minimize the sharing of high touch materials, and provide for sanitation between users?	
Hand sanitizer will be provided and exchange of materials will be avoided and discouraged when possible.	
Who will be the lead organizer of this gathering, (making sure protocols are followed)?	
Who will be your Compliance Individual at the gathering?	
How will you include members who need to participate virtually?	
When necessary, activities will be recorded or viewable on Zoom using laptop camera and/or smartphones.	
Name & Contact Information of Individual Submitting this Plan:	
Jason Adams; jason.adams@lewiscountywa.gov ; (360) 740-1216	
Initials: JCA	I attest that I have completed any required training and understand the requirements for conducting in-person activities.
Initials: JCA	For youth events, I attest that this activity will comply with all guidelines set forth in the Washington Department of Health guidance for Child Care, Youth Development, and Day Camps During the COVID-19 Outbreak, dated December 21, 2020 as amended.
Initials: JCA	I understand that I will need to collect the names, contact information, and attestation forms of all participants and submit them to the County Extension office within 3 days of our event.
Initials: JCA	If I learn that a member of our group or their family members have tested positive for COVID-19, I agree to consult CDC Guidelines and contact our local health department to discuss the management of potentially exposed individuals. I also agree to notify the County Extension office.
Signature:	Date:
County: Lewis	Current Region Phase: