**ATTENTION**

Do you have any of the following symptoms?

<table>
<thead>
<tr>
<th>Feeling of fever or chills?</th>
<th>Shortness of breath?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>New onset of cough or increase in amount of coughing?</strong></td>
<td><strong>New onset symptom: runny nose/ congestion?</strong></td>
</tr>
<tr>
<td>Sore throat? Hoarse voice?</td>
<td>Headache or unusual headache?</td>
</tr>
<tr>
<td>Experiencing fatigue?</td>
<td>Sore muscles not related to overexertion or exercise?</td>
</tr>
<tr>
<td>Pink eye?</td>
<td><strong>New onset symptom: diarrhea? Vomiting?</strong></td>
</tr>
<tr>
<td>Have a skin rash of an unknown cause?</td>
<td><strong>New onset symptom: loss of taste and/or smell?</strong></td>
</tr>
</tbody>
</table>

Have you or a member of your household had close contact (within 2 metres) with a confirmed case of COVID-19?

Are you, or a member of your household, waiting for COVID-19 testing results?

Is a member of your household sick with COVID-19 symptoms, and waiting for COVID-19 test results?

Have you been exposed to COVID-19 in a work or public setting in the last 14 days? (e.g. a setting that has been identified by public health as a risk for acquiring COVID-19, such as on a flight, at a workplace or in a community with a cluster of cases, or at an event?)

Have you received a notification from the COVID Alert app that you may have been exposed to COVID-19?

Have you or a member of your household been identified as a close-contact and instructed to self-isolate?

In the last 14 days, have you returned:
- From a Canadian province/territory and you have less than two COVID vaccinations or it has been less than two weeks since your second COVID vaccination?
- From non-essential travel outside Canada?

Travel restrictions are subject to change; up-to-date information is available at: https://www.gov.mb.ca/covid19/soe.html

**IF ALL ANSWERS ARE NO**

Wash your hands again and enter

**IF ANY ANSWERS ARE YES**

**DO NOT ENTER**

winnipeg.ca/COVID-19