

The Diocese of Algoma

Questionnaire – Entering the Amber Stage

This questionnaire is intended to assist your congregation in confirming that you have considered all of the steps and decisions you will need to make to move ahead safely with the Amber stage of the return to our buildings. Please return this to your Territorial Archdeacon either by scanning the signed copy forwarding it by email, or delivering by post or in person.

Congregations may not hold indoor worship services until this document has been completed and provided to your Archdeacon.

1. Have you reviewed *Loving our Neighbours AMBER Stage* and considered how these guidelines may impact your plan to return to in-person worship and other gatherings?

Yes No_	
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- 2. Which of the following have you developed a plan for and intend to proceed or continue with?
 - a. Indoor worship
 - i. Services of the Word, Daily Office, Taize Prayer, etc.

Yes	No
Eucharist	
Yes	No
Weddings	
Yes	No
Funerals	
Yes	No
Baptism	
Yes	No
	Eucharist Yes Weddings Yes Funerals Yes Baptism

- b. Fellowship and Formation groups & activities Yes_____ No_____
- c. Food sustainability and other ministries to vulnerable persons Yes_____ No_____
- d. Building use by 12-step and other support groups Yes_____ No____

e. Building use by licenced day care or other renters

Yes____ No____

- f. Opening of church offices Yes____ No____
- If someone who has attended in-person worship or fellowship at a parish activity or volunteered with an outreach ministry contracts COVID-19, do you have a plan for how you will communicate with your congregation, members, volunteers, and clients who may have come into contact with that individual, while remembering privacy and pastoral care? Yes____ No____
- 4. What practical support do you need from your Territorial Archdeacon or from the Synod Office to help with the implementation of these plans?

Signed:

Incumbent

PrintSignatureDateParish Re-opening CoordinatorImage: CoordinatorImage: CoordinatorPrintSignatureDateChurchwardensImage: CoordinatorImage: CoordinatorPrintSignatureDatePrintSignatureDatePrintSignatureDate