# CONTACT TRACING RECORD

**Business Name:**

Customers and Guests: The Michigan Department of Health and Human Services (MDHHS) requires us to collect information on all patrons entering this establishment for Covid-19 contact tracing purposes. Please provide your contact information below. Unless used for contact tracing purposes, the information will be kept private and will not be sold or used for marketing purposes. Please note that the names of all people in a party must be recorded.

| Arrival<br>Date Time | First and Last Name | Preferred Phone Number | Other contact method (optional) |
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STAY SAFE TO STAY OPEN.