Kanuga Guest Covenant

We face unprecedented times due to the pandemic of COVID-19. The health and safety of Kanuga’s guests and staff is top priority. Because of the risks associated with this disease, Kanuga will require each guest to comply with this Guest Covenant during retreats this summer.

If CDC, North Carolina or Henderson County requirements change, understand that this covenant may be revised for Kanuga to comply with those requirements.

• Upon arrival, all persons in your party will undergo a health screening.
  • A temperature above 100 will require that you and any member of your traveling party leave Kanuga and not enter the property.
  • All members of my party must be symptom-free from any illness for at least 14 days prior to arrival.
  • Any guest who becomes sick during their stay must immediately notify Kanuga personnel.
  • You must inform Kanuga if you or anyone in your party becomes ill within 14 days after your departure.

• Everyone must comply with North Carolina’s set limits on gatherings.
  • 10-person limit on indoor gathering, including inside accommodations
  • 25-person limit on outdoor gatherings

• Everyone must wear a facial covering when in any indoor public areas.

• When visiting other guest groups and where physical distancing cannot be met, Kanuga requests the use of facial coverings.
  • Visitors of Guests will be permitted and will be required to register and go through health screening upon arrival to be allowed on property.

• Trails will be open, and groups must maintain social distance from other groups when hiking.

• Children are the responsibility of parents and guardians.
  • Childcare will not be available. Kanuga cannot safely comply with updated health guidance for childcare facilities.

I understand that my traveling party and I are guests of Kanuga, it is my/our responsibility to help keep our fellow guests and Kanuga staff safe. I/we will review the covenant with all in my party and follow it. My/our violation of this covenant may cut short my stay without refund.

______________________________ ______________________
Signature Date