Indoor Dining Location Customer Proof of Medical Exemption from COVID-19 Vaccination

Instructions:

Philadelphia's Regulations requiring COVID-19 vaccination for indoor dining locations does not apply to unvaccinated customers with a medical exemption from their medical provider. If multiple members of your party have medical exemptions, each person must show proof from their own medical provider.

A business may choose NOT to accept your request to dine indoors. If your request is not granted, you may request your order to go or be delivered, and you must exit the indoor dining location.

What Must Be Included?

- 1. To dine at a location where food or drink is provided or sold for eating or drinking onsite, you must provide a physical copy or digital image of the original certification, which must include the following:
 - a. A statement by a licensed healthcare provider, including a physician, nurse practitioner, or physician assistant issued by an authorized state licensing board that has physically examined you in person ¹
 - b. The licensed healthcare provider must state that the exemption applies to the specific individual submitting the certification, and;
 - c. that the COVID-19 vaccine is medically contraindicated for the individual ²
- The SAMPLE FORM included on the following page may be used, an alternate format may be presented and taken as valid certifications of medical exemption IF all information on the SAMPLE FORM is also captured on any alternate format.

What Is the Process of Requesting to Dine Indoors with a Medical Exemption?

- 1. Provide a physical copy or digital image of the certification signed by a licensed medical provider, the following page may be used as a template.
- 2. Complete and sign the following page of this form.
- 3. If you are over 18, provide proof of identity including a clear photograph of the customer which matches the name of the individual listed on the physical copy or digital image of the exemption.
- 4. For any indoor dining location which seats more than 1000 people any unvaccinated person aged 5 years and three months or older must submit (in addition to exemption documentation) proof of a negative COVID test (PCR or antigen) taken 24 hours prior to the entrance to the indoor dining location.³

What Are Requirements While Indoors?

- 1. Customers with an approved exemption must still comply with the Indoor Mask Mandate which requires masking when not eating or drinking while seated.
- 2. Businesses may also implement their own COVID-19 protocols or procedures to protect the safety of staff and other customers.

¹ For the purposes of this Regulation, the individual seeking the medical exemption must have met with the licensed healthcare provider listed on the signed statement at least once in-person for a physical examination by that licensed healthcare provider

² Proof of Identity does not require a form of government-issued identification. This could include student ID cards, employee identification cards, retail membership cards, etc.

³ Over-the-counter home tests are not acceptable as proof of negative result.

<u>SAMPLE FORM – MEDICAL EXEMPTION TO COVID-19 VACCINATION</u>

For Licensed Healthcare Provider:

Signed: _____

| Provider's Name: | Business Address: |
|---|------------------------------|
| License/Certification Number: | License/Certification State: |
| I, (<u>insert provider's name</u>) certify that I did examine (<u>insert patient's name</u>) in-person on (<u>insert date of in-person examination</u>) at (<u>insert business address</u>). | |
| I hereby certify that (the patient named above) has a specific medical contraindication to the below described Vaccine(s) and it would be detrimental to such patient's Health to receive any of the following vaccines | |
| because of such patient's specific medical conditions: O Johnson & Johnson's Janssen COVID-19 Vaccine | |
| Moderna COVID -19 Vaccine | |
| Pfizer BioNTech COVID-19 Vaccine Pfizer-BioNTech Pediatric COVID-19 vaccine | |
| Pfizer-BioNTech Pediatric COVID-19 vaccine Johnson & Johnson's COVID-19 Vaccine | |
| | |
| I certify that this contraindication thereby requires a (circle one) <u>permanent</u> or temporary <u>(through mo/date/year</u> medical exemption to the City of Philadelphia's December 15, 2021 Emergency Regulation Governing the Control and Prevention of COVID-19 ("Mandating Vaccines for Individuals Working and Dining at Indoor Dining Locations") I also certify that certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein, I am subject to such penalties as may be prescribed by statute or ordinance. Signed: | |
| For Individual Seeking Exemption: | |
| The individual must also acknowledge the information on the exemption request is true and accurate. | |
| Section 1-108 of the Philadelphia Code uses the following language: | |
| "I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statement herein, I am subject to such penalties as may be prescribed by statute or ordinance." | |

Date:_____