



Contact Tracing Table Group

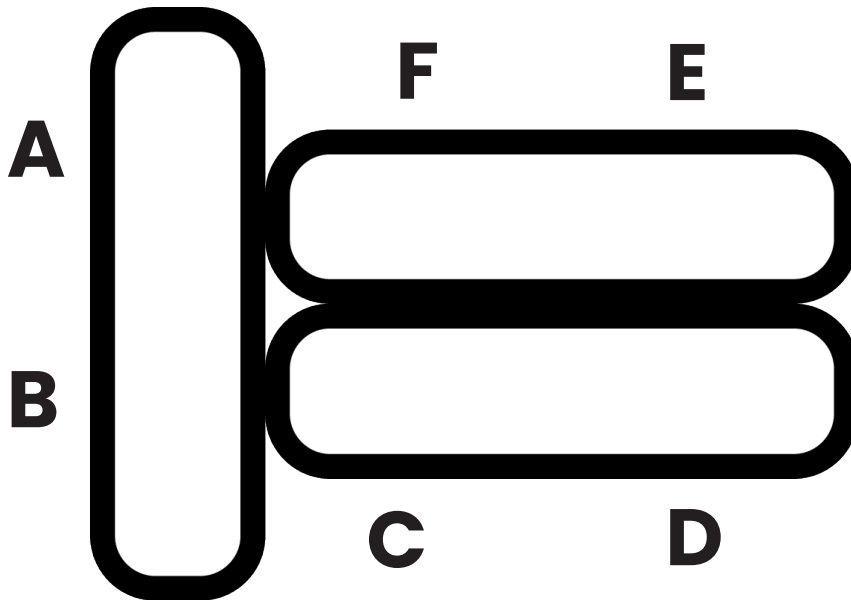
T-Bone Style setup

Host: _____

Room _____ Table Group: _____

Event name: _____

Date: _____ Time range: _____



Please print.

Seat A _____

Seat B _____

Seat C _____

Seat D _____

Seat E _____

Seat F _____

Masks are required indoors.