Dear Sister,

We were sorry to learn that you came in close contact with someone with COVID-19 and you need to quarantine.

As agreed in our house rules, to protect your sisters please remain in your room at all times, except to use the bathroom or to leave the house to get tested. Per the [INSERT LOCAL HEALTH AUTHORITY TITLE], are required to get tested on Day 5 of your quarantine\*.

You have been assigned to use the \_\_\_\_\_\_\_\_\_\_\_\_\_bathroom. Please make sure to clean all surfaces with the disinfectant and towels provided after using the bathroom to prevent further spread of the virus.

Lunch will be delivered to your room around [TIME], daily. Dinner and breakfast for the next day will be delivered around [TIME AND DAYS]. Dinners on [DAY(S) OF NON-MEAL SERVICE] night are on your own and can be delivered by a non-quarantined chapter member. Please organize that on your own. [INSERT CHAPTER/HOUSE CONTACT] will be delivering all meals. Please have patience with delivery times, as they may be delivering meals to all quarantined members. Remember to put your name, late plate, quarantine status and room number in the [MEAL SERVICE SIGN-UP METHOD] before ordering all meals.

As specified by the [INSERT STATE HEALTH AUTHORITY], you must remain in quarantine for **14 days** after the most recent contact with someone who has been diagnosed with COVID-19\*. Therefore, the soonest you will be out of quarantine is [DATE]. Please let us know if you have any symptoms and keep us apprised of changes. We’re here to help locate medical assistance if needed. If you do test positive or have any symptoms, you will need to move out of the house to isolate.

Please let us know if there is anything we can do for you while you are in quarantine.

Sincerely,

[NAME]

\*Please review or remove this item based on its alignment with your local/state health regulations.