



*The Flagg  
Township Museum  
and Historical  
Society*

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## Document your COVID-19 story

This is an important time in our history and stories need to be told and saved. Information that you share will be preserved as part of the museum collection. Please provide permission for the museum to retain your story.

Name \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

In your own words tell us who you are and what your COVID-19 experience is/has been like.

Images and videos can be sent to [flaggtownshipmuseumcovid19@gmail.com](mailto:flaggtownshipmuseumcovid19@gmail.com).

Yes, you have my permission to retain this information.