



Visitor Declaration

I, (Full name)

Phone:..... Date:.....

Time in:..... Time out:..... Area visiting:.....

My temperature has been tested on entry and reads (Current temp reading)

I declare that;

I am free from COVID 19 symptoms, not awaiting COVID 19 test results or have not been in a declared hot spot as listed on the DHHS website. I have not worked at or been released from a hotel quarantine site or port of entry in the past 14 days.

I do not have a sore throat, runny nose or a cough

I do not have chills or sweats

I do not have loss or change in sense of taste or smell

I do not have any abnormal shortness of breath

In the last 14 days, I have not been in contact with a confirmed case of COVID 19

I am not currently required to self-isolate or self-quarantine

I am not awaiting a coronavirus test result

I am wearing a mask covering my mouth and nose and will keep it on at all times

I will wear any other Personal Protective equipment if I am requested to by staff

I keep a distance of 1.5m (5 feet) from people at all times

I will enter and leave directly without spending time in common areas

I will perform hand hygiene before entering and after leaving a resident's/patient's room

Penalties apply for providing false information. If you have any symptoms, however mild, you must get tested and isolate until your test results are known.

Signature