

Dear Valued Guest,

Due to the recent outbreak of Coronavirus (COVID-19) and in line with the Australian government guidelines to mitigate the spread of COVID-19, and having regard for your health and safety and that of our employees and other guests, we request for your cooperation in taking precautionary measures to prevent the spread of COVID – 19.

If you would kindly fill out this declaration it would be most appreciated.

Your privacy is important to us. In providing the information in this form, you consent to our collection, use, processing, transfer, and/or disclosure of your personal data, including any sensitive data, in accordance with all applicable laws for the purposes of:

- Monitoring, evaluating, and responding to the COVID – 19 outbreak;
- Providing accommodation and services in the Hotel having regard to Public Health Agency guidelines, and, to the extent necessary, for the safety of our guests and staff;
- Providing information to Public Health Agencies, medical personnel and any other relevant governmental agency.

Please note that we will securely retain this information for a period of 30 days following your check-out from our hotel after which time it will be securely destroyed.

	Yes	No
QUESTION 1		
Are you required to self-isolate due to your travel history?	<input type="checkbox"/>	<input type="checkbox"/>
QUESTION 2		
Have you had close contact with someone who is diagnosed with or suspected of having COVID – 19 in the past 14 days?	<input type="checkbox"/>	<input type="checkbox"/>
QUESTION 3		
Do you have any reason to believe that you have or may have COVID- 19?	<input type="checkbox"/>	<input type="checkbox"/>

If your answer is “Yes” to any question please consult the Australian Government Department of Health website including, in particular its published information for hotel guests:

<https://www.health.gov.au/resources/publications/coronavirus-covid-19-information-for-hotel-guests>

If you become ill with COVID-19 related symptoms, are tested for or diagnosed with COVID-19 or become aware of the need to self-isolate whilst staying at our hotel or within 14 days of your stay, please inform us immediately and follow the advice from the Public Health Agency for the state in which you are located. The number for each Public Health Agency is available at: www.health.gov.au/state-territory-contacts

Name: _____ Room No: _____

Nationality: _____ Date of check out: _____

Mode of Transport. Flight No: _____ Vessel Name: _____ Train/Bus Detail: _____
(air/sea/land)

Thank you for your understanding and co-operation and we apologies for any inconvenience caused.

Sign here

Date