

All Persons wishing to enter Weeran Angus are required to complete the following questionnaire. Failure to complete this form will result in you being refused access.

| 1 | Have you travelled to any Stage 4 restricted area, or been in close contact with a person from a Stage 4 restricted area, in the last 14 days? | YES / NO |
|---|--|----------|
| 2 | Have you been in close contact with a person who has tested positive for Covid-19 in the last 14 days? | YES / NO |
| 3 | Have you been in close contact with a person who has been tested for Covid-19 in the last 14 days, and still awaiting test results? | YES / NO |
| 4 | Have you within the last 72 hours experienced flu like symptoms? | YES / NO |
| 5 | Are you feeling unwell now? | YES / NO |
| 6 | I agree that i am responsible for my own distancing and will follow the recommended guidelines of 1.5 metres at all times. | YES / NO |

If you answered YES to 1-5 of the above questions you will NOT be permitted to enter "Weerangourt".

Declaration

| l, | [Full Name] From | | | [Town] |
|------------------------------|-----------------------------------|--------------|---------|---------|
| ID No: | [Drivers License Number] | | | |
| Email: | | | | |
| Address: | | | | |
| | | | | |
| declare that I have answered | the questions truthfully and to t | he best of m | ny knov | wledge. |
| Signed | Phone | Date: | / | / 2020 |