

For Office Use 職員專用

## **INDIAN RECREATION CLUB**

(Incorporated with limited liability)

63 CAROLINE HILL ROAD SOOKUNPOO VALLEY HONG KONG Telephone: 2576 6583 (General Office): 2576 7768 (Accounts Office)

: 2576 1673 (Bar & Dining Room)

CONFIDENTIAL 密件

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## Health Declaration Form 健康申報表

<u>Please complete this form upon your arrival</u>. We appreciate your cooperation. <u>請會員及來賓到訪本會時填妥健康申報表</u>。感謝閣下的配合。

A/ Details of Visit 甲/ 到訪詳情	
Date of Visit 到訪日期	Time 到訪時間
For Members 會員填寫 Name 姓名	Membership No. 會員號碼
For guests 來賓填寫 Name (as appeared on identification document)/ Telephone No. 姓名(如身分證明文件上所示/ 電話號碼	Name of Host Member (if applicable) / Associated Club/Organization 相關會員姓名(如適用) / 屬會/所屬團體
B/ Declaration 乙 / 聲明	
I hereby declare and agree that: 本人申報、聲明及同意如下:	
<ol> <li>I, my family members and guests do not have a cough, shortness of breath of other flu-like syn 本人及本人之家庭成員及來賓並無以下任何症狀,</li> </ol>	
<ol> <li>I, my family members and guests have not been out of Hong Kong in the past 14 days.</li> <li>本人及本人之家庭成員及來賓在過去 14 日內,並無離開香港。</li> </ol>	
3. I, my family members and guests have not been in close contact with someone who has been out of Hong Kong in the past 14 days. 本人及本人之家庭成員及來賓,並沒有和在過去 14 天內曾離港人士有密切接觸。	
4. I, my family members and guests have not been in close contact with someone who is a confirmed or preliminary positive case of Novus Coronavirus (COVID-19) infection in the past 14 days. 本人及本人之家庭成員及來賓在過去 14 日內,並未曾與任何確診或初步對新型冠狀病毒測試呈陽性人士有密切接觸。	
5. I understand that Members are also responsible for the declaration of their guests and family members. Any Member or guest who knowingly makes a false declaration will be considered to be in serious breach of Club rules. 本人明白會員亦須對其來賓和家屬進行之聲明負責。任何會員或來賓如故意作出虛假申報,將被視為嚴重違反本會會規處理。	
6. I confirm that the above information is accurate to my best knowledge and agree that such information will be processed and used by the Club as the need arises. 本人聲明據本人所知及所信,以上資料均屬正確無誤,並同意印度遊樂會按需要處理及使用本人所提供資料。	
Signature 簽署	Date 日期