

Company Pandemic Declaration

The following declaration is to identify potential risks or threats to the safety of patrons using the Whangamata Marina facility during the COVID-19 Pandemic. By completing this form the person named agrees that the information provided is true and correct.

*Required

1. Full Name *

2. Contact Email *

3. Contact Phone Number *

4. Company Name *

5. Name of the vessel you are working on *

6. Have you travelled outside of New Zealand in the past 14 days? *

Yes

No

7. If yes, where?

8. Have you been in contact with someone who has entered the country in the past 14 days? *

Yes

No

9. If yes, from where?

10. Do you have a history of contact with COVID-19 victims? (family, relatives, friends, neighbours) *

Yes

No

11. Have you displayed and signs of COVID-19 in the past 14 days? *

Yes

No

12. COVID-19 symptoms

13. Have you displayed any signs of sickness in the past 14 days? If so, please list below *

Yes

No

14. Sickness symptoms

15. Additional Comments