Guest Declaration Form 健康申報表

The health and safety of our guests and staff are of paramount importance to us.

During these unsettling times, we are taking additional steps over and above our already elevated health and safety measures to ensure your well-being.

In response to advice from the Department of Health, we would like your help in filling out this declaration form so we can reach you out to you if there is a need. We appreciate your cooperation and assure you that all information provided will be treated with the strictest confidence in compliance with Shangri-La's Privacy Policy.

It is also our social responsibility to request that anyone with symptoms, who has travelled abroad or been in contact with a confirmed case to only visit our hotel after they have undergone a 14-day self-quarantine as advised by the authorities.

我們把客人和員工的健康安全放在首位。

在這緊張時期,我們將採取額外的安全防疫措施,以確保您的健康。

為配合政府的防疫措施,我們希望閣下能填寫此健康申報表,確保有必要時能與您聯繫。感謝閣下的配合。我們會嚴格遵守香格里拉之《隱私政策》,確保所有資料將適當地保密。

我們將履行社會責任·需要任何有症狀·曾出國旅行或與確診病例有接觸的人士·按照政府的指示進行自我檢疫·於 14 天後才到訪我們的酒店。

Date of Visit 到訪日期: May 8 th 2020	Time 時間:
Full Name 全名:	Contact Number 電話:
Visiting area 到訪地點: Grand Ballroom	Visiting Purpose 到訪原因: CLP AGM 2020

Declaration 聲明:

I hereby declare and agree that:

- 1. I do not have and have not had in the past 14 days of the following symptoms fever, malaise, dry cough, shortness of breath or other flu-like symptoms. 本人現時及過去 14 日內並無任何以下症狀, 包括發燒、乏力、乾咳、呼吸困難或感冒症狀。
- 2. I have not been out of Hong Kong in the past 14 days. 本人過去 14 日內並無離開香港。
- 3. I confirm that the above information is accurate to my best knowledge and agree that such information will be processed and used in accordance with the hotel's privacy policy statement. 本人聲明據本人所知及所信, 以上資料均屬正確無誤, 並同意酒店根據本酒店之 <私隱條款> 收集及使用本人之個人資料。

Signature 簽名:_	Date 日期:	
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