



# COVID-19 VISITOR QUESTIONNAIRE

In the current COVID-19 environment it has become imperative that we implement a number of precautions within our company to ensure the safety of our staff and their families. We ask that all visitors complete the following information:

Who you are visiting? .....

Time of Arrival: .....

Please respond to the questions below by indicating in the box provided Yes or No. If your answer is YES, we ask that you notify us prior to your appointment.

HAVE YOU BEEN IN CONTACT WITH ANYONE WHO HAS TRAVELLED FROM OVERSEAS or BEEN OVERSEAS YOURSELF WITHIN THE LAST 14 DAYS?

HAVE YOU BEEN IN CONTACT WITH or BEEN IN A RED ZONE IN AUSTRALIA WITHIN THE LAST 14 DAYS?

HAVE YOU BEEN ASKED TO SELF-ISOLATE WITHIN THE LAST 14 DAYS?

HAVE YOU TESTED POSITIVE TO COVID-19?

ARE YOU AWAITING A COVID-19 TEST RESULT?

DO YOU HAVE ANY OF THE FOLLOWING SYMPTOMS?  
SYMPTOMS OF INFLUENZA LIKE ILLNESS INCLUDING ELEVATED FEVER or  
SYMPTOMS OF ACUTE RESPIRATORY INFECTION (e.g. shortness of breath, cough, sore throat)

| YES or NO |
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I HEREBY DECLARE THAT THE INFORMATION CONTAINED ON THIS DOCUMENT IS TRUE AND CORRECT AS AT

DATE ..... TIME .....

SIGNED .....

PRINT NAME .....

CONTACT NUMBER .....

Additionally, we request that you support us to reduce the risk of passing on infections by:

- 1 Scanning the QR code upon entering our premises
- 2 Using the alcohol-based hand sanitiser provided
- 3 Wearing a MASK whilst in our premises
- 4 Having your temperature tested on arrival
- 5 Exercising personal social distancing where possible

PLEASE RETURN THIS FORM TO [HELEN@CHARLESLOYD.COM.AU](mailto:HELEN@CHARLESLOYD.COM.AU) ON THE MORNING OF YOUR APPOINTMENT