



旅客健康聲明書 COVID-19 Health Declaration Card

配合政府防疫政策，請您誠實回答（若"是"則打"✓"，"否"則打"×"）。

According to the Communicable Disease Control Act, you are required to fill in and submit this form accurately. (If "Yes", place a check mark "✓" ; If "No", place a check mark "×".)

- ☐ 請問您或他人（同房旅客、訪客）14 天內，是否有出入境任何國家/地區（含轉機）？
Have you (including co-residents, visitors) visited, or transited, any countries/regions in the past 14 days?
- ☐ 請問您或他人（含同住者、同行者）21 天內是否有發燒（高於或等於 37.3°C）、呼吸道症狀、咳嗽、喉嚨痛、全身無力等類似 COVID-19 症狀？（已服藥者亦須勾選「是」）
Have you (including co-residents, visitors) had COVID-19-like symptoms such as fever (equal or higher than 37.3 degree Celsius), shortness of breath, difficulty breathing, cough, sore throat, extremely fatigue, muscle or body aches? (For those who had taken medications, please place a check mark "✓".)
- ☐ 請問您或他人（含同住者、同行者）是否接獲「居家隔離通知書」、「自主健康管理通知書」、「旅客入境健康聲明暨居家檢疫通知書」？
Have you (including co-residents, visitors) received a "Home (Self) Isolation Notice", "Self-Health Management Notice " or " Health Declaration and Home Quarantine Notice"?

請回答以上問題後簽名，謝謝您的合作。

Please sign once you have answered above questions. Thank you for your cooperation.

簽名 Signature : _____

同房旅客姓名 Co-residents Names : _____

日期 Date : / /