EMILY LYNN VOCALS

www.emilylynnvocals.com 07708828727

Due to the ongoing and rapidly changing situation with the novel-coronavirus (COVID-19), we are requiring all visitors to Emily Lynn Vocals Studio to fill-out the self-declaration form below. We will make a decision on access to the studio based on the answers provided below.

Each visitor must complete this form 48 hours prior to your arrival to our premises. Please return it to emilylynnemilylynn@hotmail.com and we will contact you to confirm clearance.

We are collecting personal data of visitors to our facilities for the purposes of enabling us to carry out testing and other response measures, for any emergency that may arise due to 2019-novel Coronavirus (COVID-19) and may threaten the life, health or safety of other individuals. The information will be destroyed once there are no business and legal purposes to keep them.

We have the right to refuse entry to any persons who are unwell, who have been to locations of public health concern in the past 14 days, or who have been in contact with any person with a confirmed case of the coronavirus.

Contact Information:

COVID-19 in the past 14 days? YES/NO

Full Name:
Mobile:
Email:
Reading:
Visitor Company/Show name: Health Wellbeing and Recent Travel History

2. Do you currently have a fever or any flu like symptoms such as persistent cough, runny nose or sore throat? YES/NO

1. Have you been in contact with any person who is a confirmed case of

On arrival at the studio, we may perform a basic temperature check on any or all attendees. If a fever of 38C or higher is detected the studio manager reserves the right to refuse entry. In these circumstances, you will then need to reschedule your session for the services you arranged. Refunds are not available for on day refusal of entry and we can not be held responsible for

denied entry to any attendee upon discovery of ill health. Please check your show's personnel in its entirety before committing to your booking.

By signing below, you are consenting both to this check, and also that you will comply, and co- operate with any instructions issued by the studio manager.

Acknowledgement

I have answered all questions truthfully and to the best of my knowledge. I acknowledge and agree to the collection and use of my personal data, health information and recent travel history for the purposes set out in this Form.

information and recent travel history for the purposes set out in this Form.
Signature:
Date:
FOR EMILYLYNNVOCALS USE ONLY: I HAVE CHECKED THE ABOVE DECLARATION AND THE VISITOR IS CLEAR TO VISIT THIS SITE. TEMPERATURE: PRINT: SIGNED:
DATE:
FOR EMILYLYNNVOCALS USE ONLY: I HAVE CHECKED THE ABOVE DECLARATION AND THE VISITOR IS NOT CLEAR TO VISIT THIS SITE. TEMPERATURE: PRINT: SIGNED:
DATE: