COVID-19

Visitors Contact Details

|  |  |
| --- | --- |
| Your Name: |  |
| Address: |  |
| Telephone No: |  |
| Date/Time of Meeting: |  |
| Meeting with:  |  |

You should NOT attend the office in the following circumstances:

* You or a member of your household has been tested positive for Covid-19.
* You or a member of your household has symptoms of Covid-19 to include a high temperature, persistent cough or loss/change of smell or taste
* You are aware that you have been in contact with someone who has tested positive for Covid-19 within the last 14 days
* You or a member of your household is currently self-isolating or has been assessed a vulnerable person as set out under current Government guidelines.

Should it be necessary, we may be required to pass on your details under the test and trace system.

Thank you.