



Coronavirus declaration

I hereby declare that:

Name	
Company	
Telephone number	

Over the last 10 days prior to filling in this statement (tick as appropriate), I:

have not had a fever.

have had no symptoms suggesting potential infection with the coronavirus.

have not been in contact with anyone potentially infected with the coronavirus.

If I should develop any coronavirus symptoms (fever, coughing, shortness of breath) during this visit, I will interrupt this visit immediately.

In the event that I am diagnosed with the coronavirus within now and 10 days, I will inform Vreugdenhil Dairy Foods.

Date	
Town	
Signature	

Please return this form completed and signed to your Vreugdenhil contact. This form will be destroyed after 3 weeks.