## Sign-in Register

Unitec COVID-19 sign in Protocols

			Contact Tracing Information			Health Declaration I declare that I HAVE NOT		
	Date	Full name	Name of the activity you are joining	People you travelled with	Contact Number	<ul> <li>arrived into NZ within the past 14 days</li> <li>been in contact with someone with COVID-19 symptoms</li> <li>had any COVID-19 symptoms</li> </ul>	Time in	Time out
1 -								
2 -								
3 -								
4 -			A CONTRACTOR					
5 -								
6 -			to the state of					
7 -								
8 -	HE STATE OF							
9 -								
10 -					THE RESERVE			

## Instructions:

At the end of the day please forward to the Health and Safety team - safety@untitecac.nz