

# Health Declaration Form for Event Entry

Download a **health declaration form sample** to ensure all event attendees comply with safety protocols. This document helps organizers collect vital health information for a secure and well-managed event entry. Customize the form to suit specific event requirements and maintain a safe environment for everyone.

## Personal Information

### Full Name

### Contact Number

### Email Address

### Event Name

## Health Status

### In the last 14 days, have you experienced any of the following symptoms?

Fever

Cough

Shortness of breath

None of the above

### Have you been in contact with a confirmed COVID-19 case in the past 14 days?

 -- Select --

### Have you traveled internationally in the past 14 days?

 -- Select --

## Vaccination Status

### Have you been fully vaccinated for COVID-19?

 -- Select --

## Additional Information (Optional)

I hereby declare that the information provided is true and accurate to the best of my knowledge.

**Submit**

Your health information will be kept confidential and used solely for event safety purposes.