

**DOCUMENT TO BE COMPLETED BY PASSENGERS BEFORE BOARDING**

(It is completed by adults passengers for both themselves and their under-18-year children who are travelling with them )

DATE

Passenger’s NAME

VESSEL

Passenger’s SURNAME

JOURNEY

NAME of Passenger’s Father

PERSONAL INFORMATION OF THE UNDER-18-YEAR CHILDREN WHO ARE TRAVELLING WITH YOU

CONTACT TELEPHONE (PREFERABLY MOBILE PHONE NUMBER) EMAIL

Please complete the following questionnaire – by checking Χ in the relevant field.

Within the last 14 days: Yes No

|  |  |  |
| --- | --- | --- |
| Have you had symptoms of fever, severe cough or other symptoms?  Have you had a person in your immediate family or professional environment who has been infected with COVID -19? |  |  |
| Have you lived in the same household as a patient who has been infected with COVID -19? |  |  |
| Have you visited anyone who has been infected with COVID -19? |  |  |
| Have you provided care for someone who has been infected with COVID -19? |  |  |
| Have you returned from a country abroad? |  |  |
| Have you travelled with a patient with COVID-19 in any kind of conveyance? |  |  |
| Have you had close contact with a health care worker (doctor/ nurse) who has been infected with COVID -19? |  |  |

The above personal data and sensitive data are collected and processed solely for the purposes of compliance with applicable law, the execution of the contract of carriage and the protection of individual and public health. They will be maintained for a period of 30 days unless requested by the Competent Authorities to be maintained for a longer period. The above data will not be disclosed to third parties, only following a relevant order from the Competent Authorities.

If you wish to be informed of the data we hold about you, to correct it, to update it or to delete it, if it is no longer necessary to maintain them, you can contact our Company at the following e-mail address: [reservations@alkoferries.gr](mailto:reservations@alkoferries.gr)

I declare responsibly that the above information is true. I agree and accept the need to process personal data and sensitive personal data for the aforementioned purposes

Signature