

HISTORIC HOUSE HOTELS – 2021

Guest Pre-arrival Questionnaire - Spa

We have taken the best advice and measures to ensure that all is in place for a visit that will be as safe as it will be comfortable and enjoyable. In the interests of the safety of all our guests and staff, please complete this form in respect of yourself and all members of your party and return it to hotel email address **24 hours** before your visit, to enable access to the restaurant.

Name(s) of guest(s)	Date of Reservation

SYMPTOMS OF COVID- 19 (including)
HIGH TEMPERATURE, A NEW PERSISTENT DRY COUGH,
SHORTNESS OF BREATH, NEW LOSS OF TASTE OR SMELL, FATIGUE

Please complete as appropriate below:

Yes/No I confirm that I do not have, or have had any of the above symptoms in the last 14 days. I also confirm that this is the case for all members of my party, and our collective households.

Yes/No Please confirm that you and your party, and members of your household have not travelled outside of the UK or specified non-air bridge countries in the last 14 days. (Yes means NOT travelled).

Yes/No I confirm that all guests in my party comprise no more than two households, and/or comprise the same support bubble.

Social distancing, and Health and Safety Responsibilities

We request that you and all members of your party will abide by social distancing, and the measures applying to guests and everybody working at an Historic House Hotel, introduced for everyone's safety (see accompanying paper), and that you will respect any requests made by staff in relation to this. This company cannot be held responsible for any COVID-19 Coronavirus or similar illness contracted, or allegedly contracted, whilst a guest is in, or has been at a Historic House Hotel.

Name of Guest _____ Signed _____ Date _____

Email _____ Telephone _____

Please now return to spa@hartwell-house.com

To be returned the day before your reservation