## Visitor's sheet

Please fill in this form for emergency contact (if not necessary, discard in a month later)

Date, Time		
Name		
Emergency Contact	Email:	
Number of people		
those who have above normal fever		□ No
those who have cough and sore throat		□ No
those who have been in close contact with someone who has tested positive for the COVID-19		□ No
those who have traveled to the counties or regions		
where the entry restriction is imposed or the follow-		
up observation is needed by Japanese government,		
and those who had close contact with the residents		
in those areas within the past two weeks		

## [Protection of personal information]

If necessary, we will give a document to the public health center. It will be need only for intended purpose.

