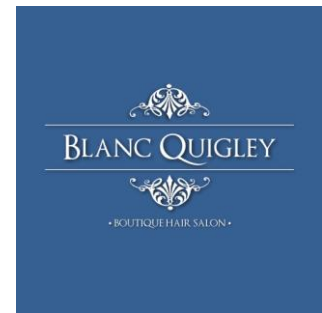


CLIENT/VISITOR COVID-19 QUESTIONNAIRE

(Must be completed prior to appointment)



NAME:	
ADDRESS/EIRCODE:	
PHONE NUMBER:	
STYLIST:	DATE:

To ensure the Safety & Health of all people interacting within Blanc Quigley Hair Salon, clients and visitors must complete this declaration form prior to entering, or on arrival at our salon.

If you have symptoms of COVID-19 or you have been abroad in the last 14 days (with the exception of Northern Ireland), as per official guidelines, you are required to either restrict your movements or self-isolate.

Where this is the case you are prohibited from entering the salon and advised to seek professional medical help/assistance in line with HSE Guidelines.

	YES	NO
1. Have you visited any other countries outside Ireland (excluding Northern Ireland) within the last 14 days?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are you currently suffering from any flu-like symptoms?	<input type="checkbox"/>	<input type="checkbox"/>
3. Are you currently experiencing any difficulty in breathing/shortness of breath?	<input type="checkbox"/>	<input type="checkbox"/>
4. Do you currently have a fever or high temperature?	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you consulted a doctor or other medical practitioner in the last 14 days?	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you been in contact with someone who has tested positive for COVID-19, or has visited an affected region, in the last 14 days?	<input type="checkbox"/>	<input type="checkbox"/>
7. Are you feeling generally well?	<input type="checkbox"/>	<input type="checkbox"/>

IMPORTANT: When in the salon, please adhere to our standard in-salon procedures regarding infection control, i.e. hand washing/hand sanitising and general coughing/sneezing etiquette.

SIGNATURE:	DATE:
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