

## Confidential Client Record

Have you been in close contact with someone who has confirmed Covid-19 without appropriate PPE?

Have you or anyone in your household been diagnosed with Covid-19 in the last 14 days?

Have you or anyone else you have been in contact with had any of the following symptoms within the last 14 days: a dry cough, fever, high temperature, shortness of breath, loss of the sense of taste or smell, or sore throat?

Have you travelled outside of the UK within the last 14 days?

If you have answered **yes** to any of these questions,  
***You need to cancel your appointment please.***

If you can answer **no** to any of the above, then please sign below that you knowingly and willingly agree to have services performed by your stylist in EQUATE during the present Covid pandemic.

I understand and accept that I will follow the procedures as stated by Equate and that I have read and understood the guidelines that the salon has in place.

**I confirm that I have understood these terms.**

Client signature:

Client name

Date:

Staff signature:

Date:

Address: of client:

Home Number:

Mobile Number:

Email Address

Appointment date:

Under governmental guidelines, this form must be completed for all appointments as required by the NHS TEST AND TRACE service to keep a record of all clients for 21 days.

We take your privacy seriously and the information given about you will be held confidentially and in compliance with GDPR.

**PLEASE SHOW THIS FORM TO YOUR STYLIST.  
Your help is very much appreciated.**