

Kieler Woche 2021

Personal Information Form



To be completed by all participants of the event

Name as shown in the passport or other ID:

Sailing Class:

Sail Number:

Your permanent address (Street/Apartment/City/Postal Number/Country):

Your address during the event:

Your telephone number:

Countries that you visited or stayed in last 14 days:

Within the past 14 days, have you had close contact with anyone diagnosed as having disease COVID-19?

If YES, please contact the Organizing Authority immediately.

YES

NO

At the time of the check-in in Kiel, I am...

fully vaccinated

recovered

tested negative
(within the last 24 hours)

As a participant in the Kiel Week regattas, you are required to fill out this document truthfully and submit it together with all other documents and proof of vaccination, convalescent certificate or official test result of the entire crew (as a photo, digital or printout) at check-in.

Date/Place



Signature