## 疫苗接种声明书 Statement of COVID-19 Vaccination

本人曾接种新冠疫苗,拟于近期前往中国,现就接种疫苗情况声明如下:

I have taken COVID-19 Vaccination and intend to visit the mainland of China soon, and hereby I declare as follows:

姓名 My Full Name			
护照号码			
My Passport Number			
疫苗名称 Brand of Vaccine			
接种机构名称 Name of Vaccination Site			
接种机构地址 Address of Vaccination Site			
接种机构电话、电邮 Phone number, email of Vaccination Site			
第一剂接种日期 Date of the First Dose	年/Year	月/Month	日/Day
第二剂接种日期 Date of the Second Dose	年/Year		日/Day
接种机构地址 Address of Vaccination Site  接种机构电话、电邮 Phone number, email of Vaccination Site  第一剂接种日期 Date of the First Dose 第二剂接种日期	年/Year	月/Month	日/Day

本人声明:(1)以上内容和所附接种卡、接种证明等接种凭证真实无误;(2)本人将遵守总领馆要求,包括但不限于对"双检测"和有新冠肺炎感染史人员康复流程的要求;(3)本人愿意承担由此引起的一切法律责任,包括但不限于因虚报、瞒报导致被限制去中国旅行或被追究法律责任等后果。

I hereby declare that: (1) The information provided above, vaccination card and other certificates attached are true and accurate; (2) I shall strictly follow requirements including but not limited to nucleic acid and IgM antibody tests and only travel after rehabilitation process is competed if infected; (3) I shall bear all legal responsibilities for any false or concealed statement, including but not limited to restrictions to travel to China, legal liabilities or other consequences.

声明人签名	Signatur	~e:	
年/	/ear	月/Month	日 /Day