



UK TO FRANCE COVID-19 CONTROL EXIT CHECK-LIST



This document must be pre-filled & signed by the driver before arriving on Eurotunnel site

VEHICLE REGISTRATION :

BOOKING NUMBER :

| CUSTOMER DETAILS | NATIONALITY | NAME | SURNAME | AGE | (A) FRENCH HEALTH DECLARATION (Y/N) | (B) NEGATIVE COVID TEST (Y/N) | FULLY VACCINATED (Y/N) | IF NOT VACCINATED reason to travel | compelling reason to travel |
|------------------|-------------|------|---------|-----|--|--|------------------------------|---------------------------------------|--------------------------------|
| Driver | | | | | | | | | |
| Passenger #1 | | | | | | | | | |
| Passenger #2 | | | | | | | | | |
| Passenger #3 | | | | | | | | | |
| Passenger #4 | | | | | | | | | |
| Passenger #5 | | | | | | | | | |
| Passenger #6 | | | | | | | | | |
| Passenger #7 | | | | | | | | | |
| Passenger #8 | | | | | | | | | |

OFFICIAL USE ONLY

DRIVER Name :

I,

Signature :

certify that above information is correct.

At, on ... / ... / 2021

Date :

Time :

Agent initials :

Area :