

TRADE DAY BUYER REGISTRATION FORM

NEW COMPULSORY FORM - BE COVID SAFE

Registration on the day is also required including scanning a QR code.

PERSONAL DETAILS FOR CONTACT TRACING ATTENDEE NAME:			
PHONE NUMBER:			
EMAIL ADDRESS:			
HOME ADDRESS:			
BUSINESS DETAILS:			
BUSINESS NAME:			
ADDRESS:			
ABN:			
PHONE:	FAX:	MOBILE:	
EMAIL:			
TYPE OF BUSINESS:			

Please answer the below questions: -

- 1.In the past 14 days have you travelled from overseas or a COVID-19 hotspot (as declared by Queensland's Chief Health Officer) YES/NO
- 2. Have you been in close contact with a person who has tested positive for Covid-19 or awaiting Covid-19 test results? YES/NO
- 3. Are you an active Covid-19 case (i.e. tested positive)? YES/NO
- 4.Are you currently, or have you recently experienced cough, fever, sore throat, fatigue or shortness of breath? YES/NO