

This is sample document. This form must be filled out online visit. www.travel.gov.bs



Travel Health Card

The Government of The Bahamas is progressing its phased implementation plan for COVID-19. If you intend to travel within The Bahamas, you will be required to complete and submit this application.

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All fields are required.

 Male Female

Are you under self-quarantine, self or imposed by an authority?

Have you had close contact with a person who is under investigation for COVID-19?

Have you had known contact with a laboratory-confirmed COVID-19 case?

Have you had a positive COVID-19 test?

Do you have any of the following signs and symptoms? (check all that apply)

- Fever
- Loss of taste
- Cough
- Sore throat
- Shortness of breath
- Loss of smell
- Diarrhea
- Loss of appetite
- Fatigue
- Muscle pain

The information provided is true and correct to the best of my knowledge, information and belief. I acknowledge that if any of the above statements prove to be false, I may be subject to criminal proceedings. I agree to the [Terms and Conditions](#) and [Privacy Policy](#).



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