

# OLMS, Chipperfield

## Contact Card

**Name of event:**

**Date and time:**

Please do not register for this Mass/event if you have Covid related symptoms. Please return home and contact 111 to ensure you receive the care you require and to protect people's the health of others in attendance.

Please tick if you do not want to your contact details being passed on to the NHS in the event of a suspected case of Covid-19 at the parish.

**Name of the attendee:**

**Telephone number (mobile or landline) of the attendee:**

In response to Government guidance and for your safety, we are asking for your contact details so that individuals can be notified in the event of any suspected Covid-19 case. Full details of the Privacy Notice can be found at [www.rcdow.org.uk/privacy-policy](http://www.rcdow.org.uk/privacy-policy).