Name Of First Minor		
Name	Second name	Last name
my full name	my full name	my full name
,	,	
m.ii.		
Telephone		ender: Friends
(123) 456-7890		nenas
First Birth Date of Minor		
<b>Additional Information of</b>	first of the Minor	
Passport#:		
(123) 456-7890		
Have you had any of the fo	ollowing symptoms	in the past 14 days?
Fever:		
10,01.		
OYes		
<b>●</b> No		
Cough (new onset or worsening o	f chronic	
cough) *		
Yes		
$\mathbf{e}_{N_0}$		
Throat pain		
Oyes		
●No		
Difficulty breathing (dyspnea)		
OYes		
<b>●</b> No		
NT de		
Nausea *		
Oyes		

Abdominal pain *
$\circ_{\mathrm{Yes}}$
$QN_0$
Chills *
Ϋ́es
$ \mathbf{e}_{N_0} $
Headache
Yes
Muscle aches (myalgia)
Oyes
Fatigue *
⊙Yes •No
<b>4</b> 40
Runny nose (rhinorrhea) *
$\circ_{\mathrm{Yes}}$
$\P_{N_0}$
Vomiting
ΟYes
$ \mathbf{e}_{N_0} $
Diarrhea (3 loose stools / day) *
OYes ONo
Loss of smell *
Oyes
Loss of taste
$\circ_{\mathrm{Yes}}$
$\P_{N_0}$

Other Specify				
(123) 456-7890				
Date of onset of the first symptoms	3			
(123) 456-7890				
T 1 4 4				
Lab test				
Test type: nasal swab (PCR	a) / antigen / SA	RS-COV-2		
	) · · · · <b>g</b> · · · ·			
Select the test				
OLNEGENIO				
CANTÍGENO CRT-PCR				
PCR-24hrs				
PCR-24hrs				
PCR				
Address of the Minor				
Address		Address2		
street address line number one		street address line number two		
street address line number one		street address line number two		
Town		Zip Code		
full street address		zip code or postal code		
State / Province		Country		
Alabama		Afghanistan	Afghanistan	
Signature				
Email address		7		
		]		
Email address me@mydomain.com				
Email address				
Email address me@mydomain.com				
Email address me@mydomain.com	Second name		Last name	
Email address  me@mydomain.com  Parent Or Guardian Name			Last name  my full name	

Telephone	Gender:			
(123) 456-7890	male			
Electronic signature acceptance				
signature. If this is not what you want, you have the his box, you warve this right Upon acceptance, you he electronic record. You will not have to pay anythe software or hardware to view it. Your acceptance of effect until such time as you notify us in veriting that revocation of your acceptance will not entall any peany document will remain in effect until such time a electronic signature. The revocation of your acceptance of electronic signature for any document will remain	ic signature will be used in place of your handwritten right to ask to sign a paper copy instead. By checking a may request in writing that we send you a paper copy of hing for such a copy, and you do not need any special electronic signature for any document will remain in at you no longer wish to use electronic signature. The malty for you Your acceptance of electronic signature for as you notify us in veriting that you no longer wish to use ance will not entall any penalty for you Your acceptance in in effect until such time as you notify us in veriting that revocation of your acceptance will not entall any penalty			