

# 疫苗接种声明书 Statement of COVID-19 Vaccination

本人曾接种新冠疫苗，拟于近期前往中国，现就接种疫苗情况声明如下：  
I have taken COVID-19 Vaccination and intend to visit the mainland of China soon,  
and hereby I declare as follows:

姓名 My Full Name	
护照号码 My Passport Number	
疫苗名称 Brand of Vaccine	
接种机构名称 Name of Vaccination Site	
接种机构地址 Address of the Site	
接种机构电话、电邮 Phone number, email of Vaccination Site	
第一剂接种日期 Date of the 1st Dose 年/Year 月/Month 日/Day	
第二剂接种日期 Date of the 2nd Dose 年/Year 月/Month 日/Day	
第三剂(如有)接种日期 Date of the 3rd Dose 年/Year 月/Month 日/Day	
第四剂(如有)接种日期 Date of the 4th Dose 年/Year 月/Month 日/Day	

本人声明：(1) 以上内容和所附接种卡、接种证明等接种凭证真实无误；(2) 本人将遵守总领馆要求，包括但不限于对“双检测”和有新冠肺炎感染史人员康复流程的要求；(3) 本人愿意承担由此引起的一切法律责任，包括但不限于因虚报、瞒报导致被限制去中国旅行或被追究法律责任等后果。

I hereby declare that: (1) The information provided above, vaccination card and other certificates attached are true and accurate; (2) I shall strictly follow requirements including but not limited to nucleic acid and IgM antibody tests and only travel after rehabilitation process is completed if infected; (3) I shall bear all legal responsibilities for any false or concealed statement, including but not limited to restrictionsto travel to China, legal liabilities or other consequences.

声明人签名 Signature : \_\_\_\_\_  
\_\_\_\_\_年/Year \_\_\_\_\_月/Month \_\_\_\_\_日/Day