



**英皇娛樂酒店有限公司\***  
**Emperor Entertainment Hotel Limited**  
(Incorporated in Bermuda with limited liability)  
(於百慕達註冊成立之有限公司)  
(Stock Code 股份代號: 296)

**股東特別大會 (「股東特別大會」) SPECIAL GENERAL MEETING (“SGM”)**

**健康申報表 HEALTH DECLARATION FORM**

經考慮到不斷變化的新冠病毒疫情，英皇娛樂酒店有限公司 (「本公司」) 於股東特別大會實施防疫措施及特別安排，以應對出席人士受感染的風險。敬請 閣下如實填寫以下資料，並交予股東特別大會股東登記櫃檯的工作人員。

Considering the evolving COVID-19 situation, Emperor Entertainment Hotel Limited (the “Company”) will implement precautionary measures and special arrangements at the SGM with a view to addressing the risk to attendees of infection. **Please complete the following information to the best of your knowledge and return it to the staff at the registration counters at the SGM venue.**

**甲部 Part A** (請於適當方格內填上「√」號 Please put a “√” in the appropriate box)

在過去14日內，In the past 14 days,

☐ 本人無須按香港特區政府要求進行新冠病毒強制檢測。

I was **not required** to undergo **compulsory COVID-19 testing** of HKSAR Government.

或 OR

☐ 本人須按香港特區政府要求進行新冠病毒強制檢測，檢測結果為陰性。

I was required to undergo compulsory COVID-19 testing of HKSAR Government and was **tested NEGATIVE**.

如 閣下 (i) 出現乙部所列出的任何一項症狀或 (ii) 於丙部的任何問題的回答為「是」，閣下可能不會獲准進入股東特別大會會場。

If (i) you have any of the symptoms as set out in Part B or (ii) your answer to any of the questions under Part C is “YES”, you may not be admitted to the SGM venue.

**乙部 Part B** (請圈選適用的症狀 Please circle as appropriate)

閣下在過去14日內是否有以下任何症狀? **Do you have any of the following symptoms within the past 14 days?**

發燒 Fever

咽喉痛 Sore Throat

氣促 Shortness of Breath

咳嗽 Cough

呼吸困難 Breathing Difficulty

**丙部 Part C** (請圈選適用的答案 Please circle as appropriate)

在過去14日內，In the past 14 days,

(i) 閣下曾否到訪香港以外地方?

Did you **travel outside Hong Kong**?

是 否

Yes No

(ii) 閣下曾否與曾經到訪香港以外地方的人士有密切接觸?

Have you been in **close contact**<sup>#</sup> with any **person who travelled outside Hong Kong**?

是 否

Yes No

(iii) 閣下是否曾經或現正接受香港衛生署的強制檢疫或醫學監察安排?

Have you ever been under **compulsory quarantine or medical surveillance order** by the Department of Health of Hong Kong?

是 否

Yes No

(iv) 閣下是否與新冠病毒的初步確診/確診患者或快速測試呈陽性人士有密切接觸?

Have you ever been in **close contact**<sup>#</sup> with person(s) tested positive / preliminarily positive, or person(s) with positive Rapid Antigen Test result of COVID-19?

是 否

Yes No

(v) 閣下是否曾經或現在與正在接受家居檢疫的人士同住?

Have you ever **lived with any person under home quarantine**?

是 否

Yes No

<sup>#</sup> 密切接觸指 (其中包括) 有直接身體接觸、一同居住或有近距離社交接觸。

Close contact means (among other things) having direct physical contact, living in the same household or having social contact in close proximity.

本人聲明以上申報內容全部屬實及正確。I declare that all the above information is true and correct.

全名 Full Name: \_\_\_\_\_

手提電話號碼 Mobile no.: \_\_\_\_\_

簽名 Signature: \_\_\_\_\_

日期及時間 Date & Time: \_\_\_\_\_

收集個人資料聲明：閣下須提供在此表格中收集的所有資料，以用於本公司預防傳染病發生或傳播相關之工作。若 閣下未能提供所有資料，本公司將無法評估 閣下是否適合出席股東特別大會，而 閣下將可能不會獲准進入股東特別大會會場。所有資料只會在 閣下同意或在《個人資料(私隱)條例》允許的情況下，向其他人士或機關作出披露。所有收集的資料將在股東特別大會結束後21天內銷毀。閣下有權按照《個人資料(私隱)條例》要求查閱及/或更正 閣下的個人資料，而有關要求須透過電郵以書面形式向本公司之公司秘書提出 (電郵地址為 cosec@EmperorGroup.com)。

Personal Information Collection Statement: Your supply of all information collected in this form is required for the purpose of the Company's prevention of the occurrence or spread of infectious diseases. If you fail to provide the information, the Company will not be able to assess your suitability to attend the SGM and you may not be granted access to the SGM venue. The information will only be disclosed to other parties or authorities with your consent or where it is permitted under the Personal Data (Privacy) Ordinance. All information collected will be destroyed in 21 days after the SGM. You have the right to request access to and/or correction of your personal data in accordance with the provisions of the Personal Data (Privacy) Ordinance, and any such request should be in writing by email to Company Secretary of the Company at cosec@EmperorGroup.com.

\* 僅供識別 for identification purpose only