



## COVID-19: Quarantine Plan

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### Transportation

When I will arrive at \_\_\_\_\_ in the city of \_\_\_\_\_  
(entry point to Canada), (name of the city),

I have planned to take the following transportation in order to arrive at the transit point

\_\_\_\_\_  
(city and specific location with address)

or to arrive at the place where I will spend my quarantine period

\_\_\_\_\_  
(city and specific location with address)

I will take the following planned health and safety measures during my transit:

- washing and disinfecting hands,
- wearing of a face mask, etc.

I will not stop anywhere during my transit to my location of quarantine, and I will wear a face mask or face cover during the journey.

\*Provide proof of transport reservation/payment.

### Accommodation

The place where I will spend my 14-day quarantine (and more if necessary), without the presence of vulnerable people (people aged 65-years and more, or who have underlying health conditions), is the following: Address of Quarantine Location

\_\_\_\_\_  
(street name and apartment/house number)

\_\_\_\_\_  
(city, province, postal code)

\*Provide proof of reservation/payment of the place where you will be completing your quarantine.

I commit to obeying the following guidelines:

- Stay alone in common living spaces as much as possible.
- Eat and sleep alone in one room of the housing accommodation.
- Avoid as much as possible to be in contact with other people in the accommodation. If this is impossible, to keep a 2-meter distance between myself and others. To cover my nose and mouth if I must get within 2 meters of another person.
- Air the living space and my room by frequently opening my window if the weather permits.



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### Food and Hygiene

During my 14-day quarantine, I plan on feeding myself by the following means:

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*\*Detail how you will provide the food. For example: My outfitter, Bill, will have meals delivered to my cabin door and left for me to retrieve. There is running water in the cabin for hydration.*

### Health and emergency care

In case of sickness or symptom onset of COVID-19, I will contact the local public health authorities via the following contact number \_\_\_\_\_.  
(to be provided by your tourism operator)

I will go to a screening centre/medical clinic/hospital whilst following health and safety guidelines, wear a face cover, and I will inform the personnel upon my arrival that I have travelled abroad.

### Financial Means

I have a credit card and Canadian currency that will allow me to cover the costs of transportation, accommodation, and food, as well as health or emergency care (if needed) to comply with health measures in effect on arrival in Canada, during my period of quarantine, and during my stay in Canada.

### Declaration

I agree to stay in the accommodation where I will spend my quarantine, without leaving to public places or welcoming visitors. I will respect the hygiene measures, as recommended by the Public Health of Canada and the Yukon Territory. If symptoms of COVID-19 appear, I will isolate myself and immediately call the local Public Health authorities (\_\_\_\_\_) and follow any instructions received.

Signature \_\_\_\_\_

\_\_\_\_\_  
PRINT FIRST NAME,

\_\_\_\_\_  
PRINT LAST NAME

\_\_\_\_\_  
DATE OF BIRTH

\_\_\_\_\_  
PASSPORT NUMBER