**COVID-19 REGULATIONS INFORMED CONSENT**

Date： dd/mm/yy

In accordance with Article 58 of the Communicable Disease Control Act, I, [Full Name] hereby agree the following mentioned regulations upon my entry:

1. Be quarantined for 14 days in the facility designated by the Taiwan Centers for Disease Control after landing Taiwan (R.O.C.) and receive testing for COVID-19.
2. Pay all the expenses related to the quarantine, such as food, accommodations, transportation costs, and requesting COVID-19 testing.
3. Abide by the regulations, if there is any unexpected situation related to COVID-19, further medical treatments or testing are needed or further quarantine measures need to be taken, and pay all the expenses mentioned above.

Signature：

Nationality： Passport No.：

Date of Birth： Gender：

Address in Taiwan：

Contact Person (name & phone number) in Taiwan：