**>Hier Name & Anschrift des Betriebs, ggf. Logo einfügen<**

Dear guests,

we appreciate to welcome you.

**You are obligated** to leave your name, address and phone number in order to track COVID-19 infections. Please help by filling in this form correctly.

If you do not do so, we are forced not to serve you.

|  |  |
| --- | --- |
| first name and name |  |
| street, house number |  |
| ZIP-code city |  |
| phone number |  |
|  |
| **Accompanying persons from the common household**  |
| First name and name |  |
| First name and name |  |
| First name and name |  |

date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Time of arrival \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

fare well \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

table number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Bereitgestellt vom DEHOGA Hessen. Stand 05.10.2020

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 Bereitgestellt vom DEHOGA Hessen. Stand 05.10.2020