**Follow up on the group from South Korea**

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| **Guide / contact person in Israel: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ tel: \_\_\_\_\_\_\_\_\_\_\_** |
| 1. **Number of participants: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 1. **Region/city of origin in South Korea \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 1. **Date of Arrival in Israel and Flight details: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| 1. **Additional group escorts in Israel including telephone numbers:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

1. **Travel itinerary in Israel**

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| **Date** | **Sites including time of visit and names of guides/escorts** | **Restaurants** | **Hotel Accomodation** |
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**Follow up on daily symptoms of group members: Date \_\_\_\_\_\_\_\_**

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| **Full Name** | **Passport number** | **Sex** | **Date of Birth** | **Cough/temp./ or difficulty in breathing/other** | **Date of initial symptom** |
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