



WOMZA2WHEELS

P O Box 12852, Rynfield, Benoni, 1501

WhatsApp: 074 959 1209 E-mail: info@womza2wheels.com

PERSONAL TRAVEL DECLARATION FORM

FIRST NAME:

LAST NAME:

CONTACT NUMBER:

WOMZA LICENSE NUMBER:

Have you visited or returned from overseas in the last 14 days? **YES** **NO**

Please indicate your return date, if you have

Have you been in contact with anyone who has been overseas or has returned from overseas in the past 14 days? **YES** **NO**

If yes, please indicate the date of contact

I confirm that the information given above, is accurate and complete.

DATE: (DD/MM/YYYY)

SIGNATURE:

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