



LAI FUNG HOLDINGS

麗豐控股

Lai Fung Holdings Limited

麗豐控股有限公司

(Incorporated in the Cayman Islands with limited liability)

(於開曼群島註冊成立之有限公司)

(Stock Code: 1125)

(股份代號：1125)

## 股東週年大會(「股東週年大會」)健康申報表

## HEALTH DECLARATION FORM FOR THE ANNUAL GENERAL MEETING (“AGM”)

鑑於新型冠狀病毒(COVID-19)疫情的發展，本公司將於股東週年大會實施防疫措施及特別安排旨在減低出席人士受感染的風險。敬請閣下如實填寫以下表格，並交回於股東週年大會股東登記櫃檯的工作人員。

In light of the epidemic situation of the novel coronavirus (COVID-19), the Company will implement precautionary measures and special arrangements at the AGM with a view to reducing the risk to attendees of infection. Please complete this form to the best of your knowledge and return it to the staff at the registration counters at the AGM venue.

如閣下(i)出現甲部所列出的任何一項症狀，或(ii)於丙部的任何問題的回答為「是」，閣下可能不會獲准進入股東週年大會會場。

If (i) you have any of the symptoms as set out in Part A, or (ii) your answer to any of the questions under Part C is “Yes”, you may not be admitted to the AGM venue.

## 甲部 Part A (請圈選適用的答案 Please circle as appropriate)

閣下是否有以下任何症狀? Do you have any of the following symptoms?									
發燒 Fever	是Yes	否No	咽喉痛 Sore throat	是Yes	否No	氣促 Shortness of breath	是Yes	否No	
咳嗽 Cough	是Yes	否No	呼吸困難 Breathing difficulty	是Yes	否No	皮疹 Rash	是Yes	否No	
流鼻涕 Runny nose	是Yes	否No	腹瀉 Diarrhoea	是Yes	否No	結膜炎 Conjunctivitis	是Yes	否No	
近期失去味覺或嗅覺 New loss of taste or smell							是Yes	否No	

## 乙部 Part B (請圈選適用的答案 Please circle as appropriate)

閣下是否已完成第一針COVID-19疫苗接種? Did you complete 1st dose of COVID-19 vaccination?	是Yes	否No
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## 丙部 Part C (請圈選適用的答案 Please circle as appropriate)

(i) 閣下是否正接受檢疫令? Are you <b>currently under quarantine order</b> ?	是Yes	否No
(ii) 閣下是否在政府「對若干人士強制檢測」的要求下需進行強制檢測，並正等待結果? Are you currently required by the government to undergo “ <b>Compulsory Testing for Certain Persons</b> ”, AND pending result?	是Yes	否No
在過去21日內， In the past 21 days,		
(iii) 閣下曾否到訪香港以外地方? Did you <b>travel outside Hong Kong</b> ?	是Yes	否No
(iv) 閣下是否曾經或現在與正在接受家居檢疫的人士同住? Have you <b>lived with any person under home quarantine</b> ?	是Yes	否No
(v) 閣下是否與曾經到訪香港以外地區的人士有緊密接觸*? Have you been in <b>close contact*</b> with any person who travelled outside Hong Kong?	是Yes	否No
在過去28日內， In the past 28 days,		
(vi) 閣下曾否與任何懷疑、疑似或確診感染新型冠狀病毒的人士有緊密接觸*? Have you been in <b>close contact*</b> with any person with a suspected, probable or confirmed case of COVID-19?	是Yes	否No
(vii) 閣下是否曾經或現正接受香港衛生署的醫學監察安排? Have you been under <b>medical surveillance order</b> by the Department of Health of Hong Kong?	是Yes	否No

\* 緊密接觸可指(其中包括)：有直接身體接觸、一同居住或有近距離社交接觸。  
Close contact could mean (among other things): having direct physical contact, living in the same household or having social contact in close proximity.

本人聲明以上申報內容全部屬實。I declare that all the above information is true.

全名：  
Full Name: \_\_\_\_\_

電話號碼：  
Telephone Number: \_\_\_\_\_

簽名：  
Signature: \_\_\_\_\_

日期：  
Date: \_\_\_\_\_

收集個人資料聲明：閣下須提供在此表格中收集的所有資料，以用於本公司預防傳染病發生或傳播相關之工作。若閣下未能提供所有資料，本公司將無法評估閣下是否適合出席股東週年大會，而閣下將可能不會獲准進入股東週年大會會場。所有資料只會在閣下同意或在《個人資料(私隱)條例》允許的情況下，向其他人士或機構作出披露。所有收集的資料將在股東週年大會結束後21天內銷毀。閣下有權按照《個人資料(私隱)條例》要求查閱及/或更正閣下的個人資料，而有關要求須以書面形式向本公司(地址：香港九龍長沙灣道680號麗新商業中心11樓)提出。

Personal Information Collection Statement: Your supply of all information collected in this form is required for the purpose of the Company's prevention of the occurrence or spread of Infectious Diseases. If you fail to provide the information, the Company will not be able to assess your suitability to attend the AGM and you may not be granted access to the AGM venue. The information will only be disclosed to other parties or authorities with your consent or where it is permitted under the Personal Data (Privacy) Ordinance. All information collected will be destroyed in 21 days after the AGM. You have the right to request access to and/or correction of your personal data in accordance with the provisions of the Personal Data (Privacy) Ordinance, and any such request should be made in writing and addressed to the Company at 11th Floor, Lai Sun Commercial Centre, 680 Cheung Sha Wan Road, Kowloon, Hong Kong.