

AUTHORIZATION TO RELEASE COVID-19 GUEST TESTING AND VACCINATION RECORDS

l am a m	ember of an Alaskan tour conducted by Anderson House Tours, Inc. dba
	ly provided John Hall's Alaska with my COVID-19 vaccination and/or
conducted by third-parties who are n	may choose to participate certain excursions and other activities that are ot affiliated with John Hall's Alaska and who also require me to provide record as a condition of my participation in such excursion or activity.
chosen to participate while on the to	I's Alaska in organizing the excursions and activities in which I have ur, I hereby authorize John Hall's Alaska to provide my COVID-19 es as may require such record as a condition to my participation in the chosen.
Guest Signature	
Print name	
Date	
Acknowledgement – IHA Representati	tive