

Regent

SEVEN SEAS CRUISES®

AN UNRIVALED EXPERIENCE™

APPLYING FOR
A FORMULARIO DE CONTROLSANITARIO (FCS),
OR
“HEALTH CONTROL FORM”

TO ENTER SPAIN

BY CRUISE SHIP



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INTRODUCTION

The following guide is designed to assist you with completing your application for a Formulario de Control Sanitario (FCS), or “Health Control Form” which travelers coming to Spain from abroad via cruise ship must complete as required by the Spanish government.

The FCS is an online form that asks the individual to provide information about themselves, their travel plans, and their health.

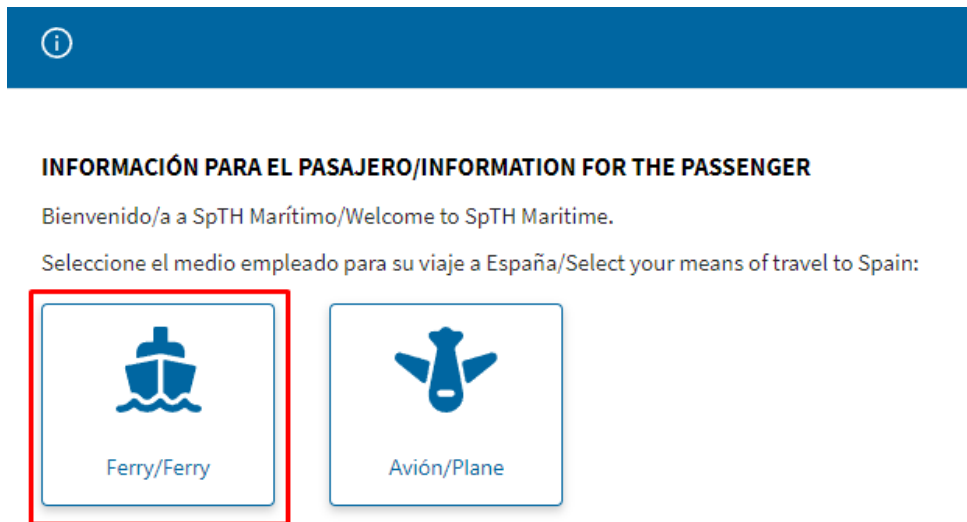
The Health Control Form is a digital document that when completed comes with a QRcode. This must be presented at the Spanish border to enter the country.

IMPORTANT INFORMATION

- All persons entering Spain from other countries, including international transits, regardless of their nationality, age, or any other consideration, must complete the Health Control Form.
- The form can only be submitted for approval within 48 hours of your entry to Spain.
- Once submitted you will receive an email with a QR Code associated with your trip to present at boarding and health controls on arrival in Spain. You must have it printed or on your mobile phone.
- More information about the FCS can be found at <https://spthm.puertoes.es/more>

ACCESSING THE FORMULARIO DE CONTROL SANITARIO (FCS), OR “HEALTH CONTROL FORM”, FOR ENTRY TO SPAIN BY CRUISE SHIP

- Go to <https://spthm.puertos.es/> to access the SpTH Maritime FCS application specifically for cruise travel into Spain.
- Click the “Ferry/Ferry” button.



- If needed, select the appropriate language using the dropdown box in the **top right corner**.



- Read through all the information on the homepage and then click “Individual FCSForm” or “Family/Group FCS form” if applicable to start the process.

The screenshot displays a website interface with a blue background. At the top, there are two yellow boxes. The left box contains a ship icon and the text: "Are you traveling to Spain by ferry? Learn more about the new health control process". The right box contains the text: "Information on entry health requirements (vaccinations, diagnostic tests, proof of COVID-19 recovery)". Below these is a section titled "New maritime form" with two blue buttons: "Individual FCS Form" (with a person icon) and "Family/Group FCS Form" (with a group of people icon). The "Family/Group FCS Form" button is highlighted with a red border. Below this is a section titled "Continue the previously created maritime form" with two blue buttons: "Continue Individual FCS Form" (with a person icon) and "Continue Family/Group FCS Form" (with a group of people icon). At the bottom, there is a yellow box with the text: "Can't fill in the electronic form?".

PRE-APPLICATION PASSENGER DATA

- To access the full application form you need to register some initial personal information.
- Read through the information on the Passenger Data page.
- For this section you need to:
 - **Advise your surname**
 - **Advise your first name**
 - **Advise the Regent ship that you are sailing into Spain on**
 - **Advise your passport number – ensure that this number is correct as it will become the unique identify in a step later in the application process**
 - **Advise the date you are sailing into Spain (November 23, 2021)**
 - **Advise and confirm your email address**
 - **Scroll down to the bottom of the page**

Passenger details

Check this box if the information you are going to fill in belongs to a minor or a dependent person in your charge.

Name *

Surname *

Vessel name *

Passport number / DNI / Personal ID *

Arrival date *

Email *

Confirm email *

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Legal Information

Each passenger must complete a form associated with each trip that will be personal and non-transferable. Make sure you remember that after signing the FCS form, you will receive a QR code associated with your trip which is mandatory for the port health control.

Likewise, when passing the port control, it can be subjected to a temperature control by means of non-contact thermometers carried out guaranteeing the privacy of the passenger and the data obtained will not be stored.

We inform you that the data you provide will be used for the purpose of ensuring control of the COVID-19 epidemic.

The person responsible for the processing of your data is the Ministry of Health of Spain, whose contact details are [here](#). Your data are the competent health authorities.

You can exercise the rights of access, rectification, deletion, opposition, limitation of treatment and portability, by clicking [here](#).

The contact details of the Data Protection Officer are delegadoprotecciondatos@mscbs.es

If you want more information about its **use of personal data**, [click here](#).

If you want more information about the **diagnostic tests of active infection for COVID-19 (PDIA), to enter Spain**, [click here](#).


If you want to get more **information** about **health measures** related to the COVID-19 epidemic, [click here](#).

To access the **information** about **health measures** related to the COVID-19 epidemic, in **other languages**, [click here](#).

The signing of this form carries the responsibility for the veracity of the information, the acceptance of the legal consequences indicated at any time by the authorities.

If you are a minor, or a dependent, the form must be signed by your legal guardian.

Yes, I have read and understand the information and accept these terms

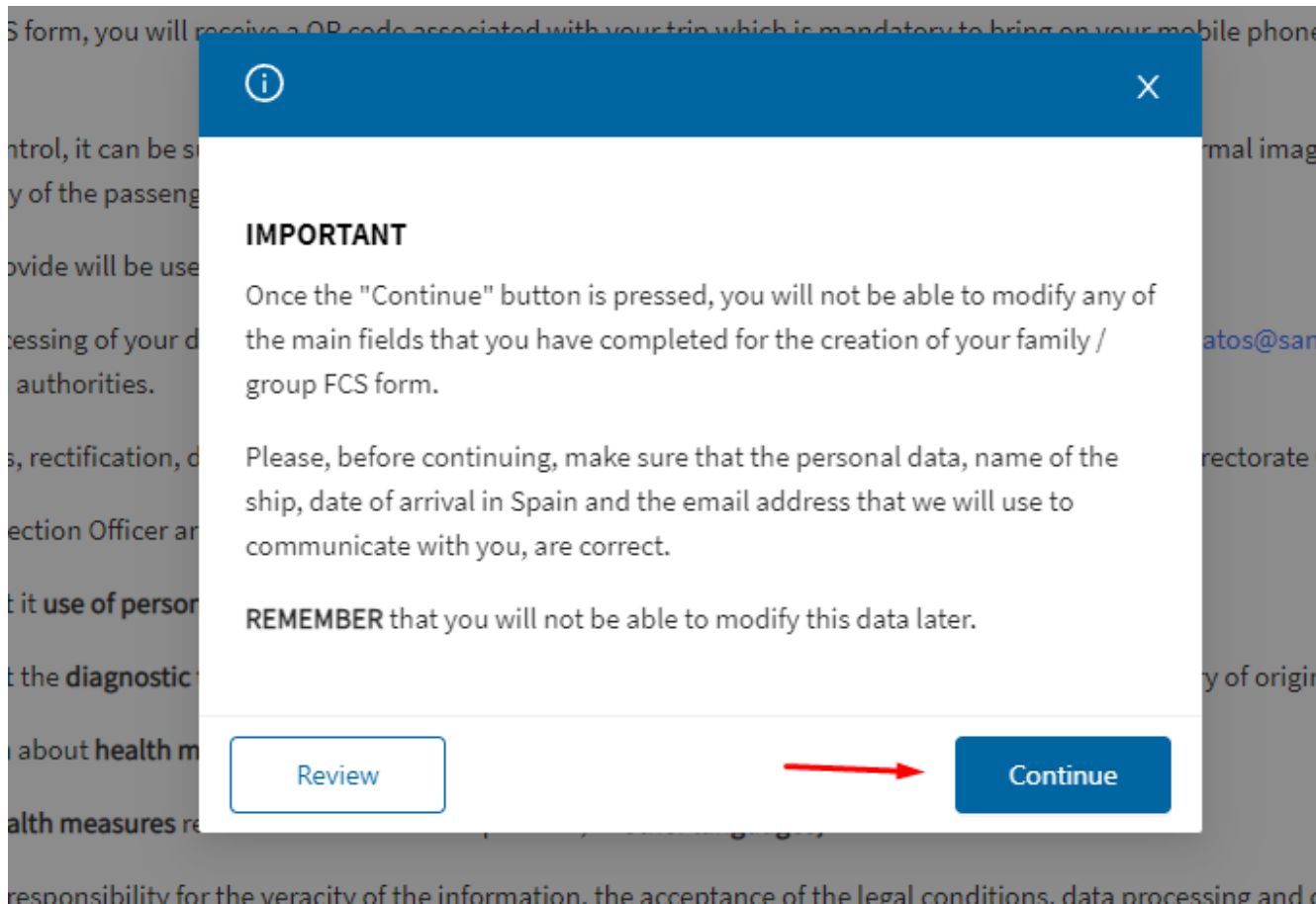
No soy un robot 
reCAPTCHA
Privacidad - Términos

Send

- Check the “**I am human**” box until a green tick appears

- Click “**Send**”

- A box will pop-up advising that you cannot make further modifications to the information provided beyond this point.
- If you are confident the information you have supplied is correct,



- click “Continue”. If you want to check the information, click “Review”.

REGISTRATION FORM EMAIL

- You should now receive an email from spthm@puertos.es. If it is not in your inbox please check your spam/junk folders.

Spain Travel Health: Registro de formulario Test Test



ⓘ If there are problems with how this message is displayed, click here to view it in a web browser.



Spain Travel Health: Form Registration

You have requested the creation of a Health Control Form (FCS) for your next trip to Spain on the SpTH portal.

The FCS form code for your trip is:

527993

You will need this six digit code later

You can complete the health control form in two ways

1. By going directly to the URL:

<https://spthm.puertos.es/passenger-data/recover/F7Dzoi46DeyPvwW>

Form identifier: **F7Dzoi46DeyPvwW**

2. By accessing the spthm.puertos.es portal, clicking on the "Continue Individual Form" button and then enter the passport, DNI, NIE or personal identifier number with which you made the request, including the code: **527993**

You can start your form at any time, but you will only be able to complete the health and travel history and questions and accept it in the last 2 days before your arrival in Spain. If you are travelling to Spain from any country, it is necessary to complete this form, and to have the QR code associated with your trip. You must present this document at the health control at the port of destination. Each passenger must have their own form and QR code for each trip to Spain.

REMEMBER that you **MUST NOT TRAVEL** to Spain if you have symptoms compatible with: COVID-19: fever, cough, difficulty breathing, onset within the last 14 days or have been diagnosed with COVID-19 within the last 14 days

- The email provides links and codes specific to your trip Spain which will allow you to start the FCS application.

- To begin the FCS application, click the link under “1. By going directly to the URL”.
- The link will bring you back to the SpTH website.
- Enter the form identifier from the email.
- Enter your passport number that you advised in your application.
- Enter the 6-digit code that was provided in your email from SpTH in the “**SecurityCode**” box.
- Check the “**I am human**” box until a green tick appears and click “Continue”.

Lead passenger details

Form identifier *

Passport number / DNI / Personal ID *

Security code *

You will have received an email from SpTH with a link to the Travel Health: Form registration page. This link facilitates direct access to the registration process.

Your personal data will be treated in accordance with the Regulation of the European Parliament and of the Council (GDPR) and the Organic Law of Protection of Natural Persons with regard to the processing of their personal data and of the free circulation of these data and of the Rights of Access to and Rectification of Personal Data and Guarantee of Confidentiality.

The person responsible for data processing is the Spanish State (Ministry of Health, other health authorities). For more information, see the [privacy policy](#).

No soy un robot

reCAPTCHA
Privacidad - Términos

Continue

COMPLETING THE FCS

STEP 1: GENERAL INFORMATION

- **If you are within 48 hours of travel, you will now be able to complete the FCS application form.**
- The form will already be populated with some of the information you advised in the registration section.
- For this section you need to:
 - **Advise your date of birth**
 - **Advise your mobile phone number**
 - **Advise your home (permanent) address including street and house number (advise this in the “Flat/Apartment No.” box), city and country.**
- Once you have entered the information, click **“Save”** and then **“Continue”**.

Health control form

1

2

3

4

5

Step 1. General information

APDUruPCsqonSjs

Personal information

Name* James Surname* Arnold Passport number / DNI / Personal ID* 123456 Email* jarnold@rssc.com

Sex Date of birth (yyyy-mm-dd)* Mobile phone*

Other phone

Permanent address

Street and number* Flat / Apartment No.*

Zip code City / Population* Province Country*

>

COMPLETING THE FCS

STEP 2: TRAVEL INFORMATION

- The form will already be populated with some of the information you advised in the registration section.
- For this section you need to:
 - Advise “Regent Seven Seas Cruises” as the “shipping company”
 - Advise your suite number
 - Advise the region of Spain you are cruising into in the “Autonomous Community” box
 - Advise the city/town (Barcelona) of the port you will sail into
- Once you have entered the information, click “Save” and then “Continue”.

Health control form



Step 2. Travel information

hCYGGVEK9YQgWak

Arrival boarding information in Spain

Shipping company *

Regent

Name of the vessel *

Seven Seas Splendor

Seat / Stateroom No.

Arrival date *

2021-10-26



Permanent address

Name of the hotel (if any)

Street and number

Flat / Apartment No.

Autonomous Community *

Select

State / Province

Select

City / Town *

Select

Zip code

Check this box if this address is permanent for your entire stay in the country.


ADD PASSENGER

- Once you have completed Passenger 1
- Click “**Add Passenger**”
- Fill out the requested information
- “**Save**”

Family/group information

▼ Passenger1 :

Name*	Surname*	Passport number / DNI / Personal ID*	Seat / Stateroom No.
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>


Sex Date of birth (yyyy-mm-dd)* 



The telephone number coincides with that of the lead passenger.

The email coincides with that of the lead passenger.

The permanent address coincides with that of the lead passenger.


The address of stay coincides with that of the lead passenger.



 **Add Passenger** 

IMPORTANT : By default, your email address, telephone number, residence address and residence address will be assigned to all passengers in the group. To edit the trip details for each passenger individually, you can uncheck the box in the corresponding field. Keep in mind that, by marking the same email for all passengers, the QR codes with individual health advice will reach you and not each of the passengers in the group.

****If you do not have an address of stay, fill in the required fields with those of the port of arrival.**

 **Save**

COMPLETING THE FCS STEP 3: TRAVEL BACKGROUND

- For this section you need to:
 - Advise the country where the cruise started
 - Advise the region of the country that the cruise started
 - Advise all countries you have visited in the last 14 days (you can choose multiple countries by clicking the “**Add Country**” button).


Greece, Turkey, Italy, France

- Select “**Tourism**” for the reason for your trip


Step 3. Travel background hCYGGVEK9YQgWak

Place of departure and previous countries

Please indicate the country where you start your trip *

Select 

Please indicate the zone where you start your trip *

Select 


Reason for the trip


Lead Passenger :

Please check an option *

Tourism Work Family visit Special mission Cooperation Others

Please indicate all the countries you have traveled to in the last 14 days

Select 


Add country 


Passenger :

Please check an option *

Tourism Work Family visit Special mission Cooperation Others

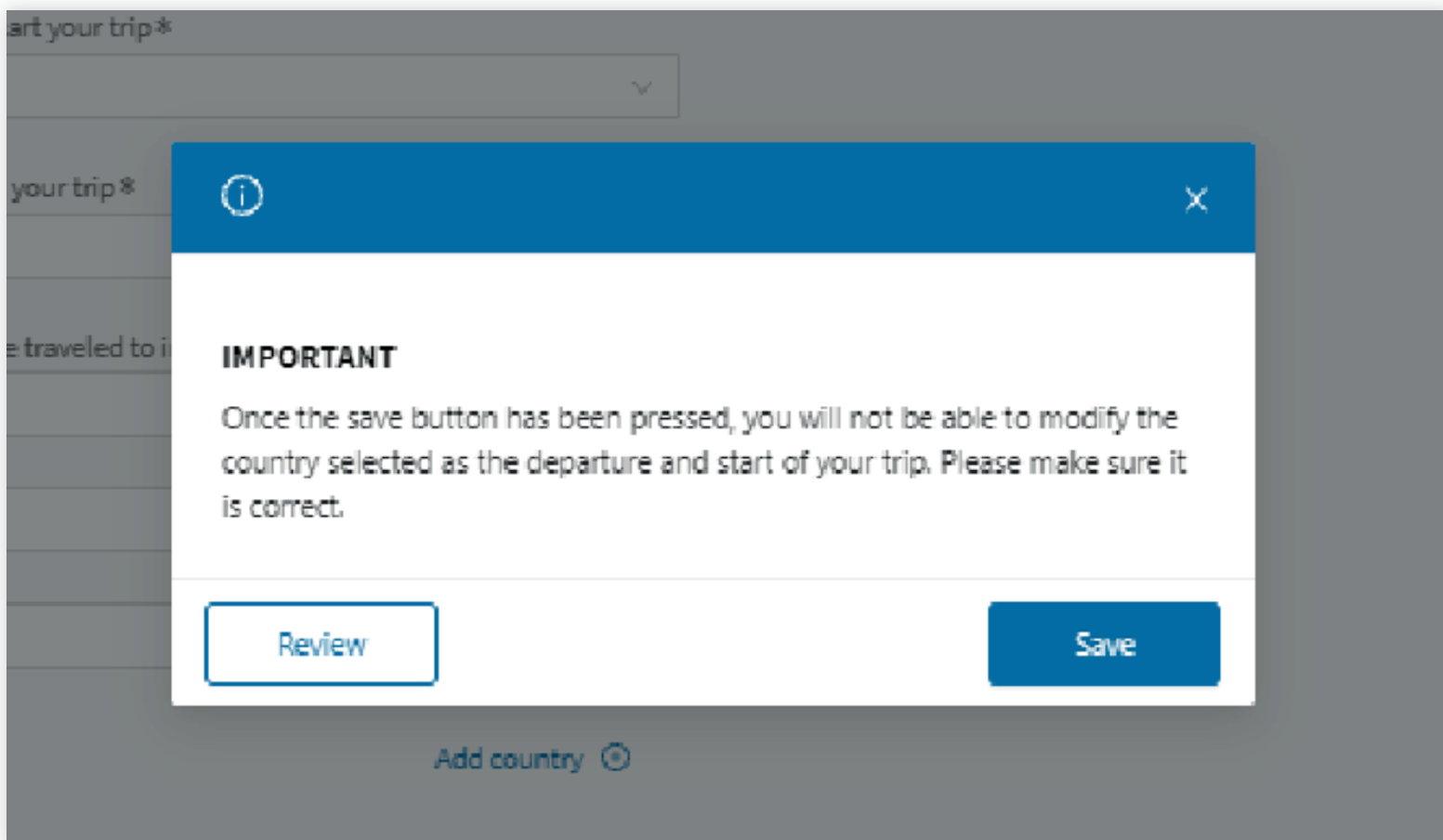
Please indicate all the countries you have traveled to in the last 14 days

Select 

Add country 

Save

- Once you have entered the information, click **“Save”**.
- A box will pop-up advising that you cannot change the country and region of the start of your trip once you press **“Save”**.
- If you are confident the information you have supplied is correct, click **“Save”**. If you want to check the information click **“Review”**.
- Once saved, click **“Continue”**.



COMPLETING THE FCS

STEP 4: HEALTH QUESTIONNAIRE

- Advise if you have had contact with a confirmed case of COVID-19 in the last 14 days, and then click “Save” and then “Continue”.

Health control form



Step 4. Health questionnaire hCYGGVEK9YQgWak

Required to enter Spain

IN RELATION TO THE HEALTH EMERGENCY DECLARED BY COVID-19, it is mandatory that you answer the following questions. If necessary, you will undergo a medical evaluation upon arrival.

Basic information

Lead Passenger : Larry Tsai - 123123123


Have you had contact with a confirmed case of novel coronavirus disease (COVID-19), in the last 14 days? *

Yes No

Passenger1 : ADA VEE - 123321123

Have you had contact with a confirmed case of novel coronavirus disease (COVID-19), in the last 14 days? *

Yes No

 **Save**

COMPLETING THE FCS

STEP 5: DECLARATION OF RESPONSIBILITY

- Confirm your declaration of responsibility and that all information you have provided is correct by checking the “Mark to accept” box and clicking “Save”.

Home / Continue the form created previously

Health control form

Progress bar: 5 steps, step 5 is active.

Step 5. Declaration of Responsibility

APDUruPCsqonSjs

I promise that if during the 14 days after entering Spain I present symptoms of acute respiratory infection (fever, cough or respiratory distress), I will isolate myself at home or place of residence, performing a self-monitoring of symptoms of coronavirus and I will contact the competent health authorities by phone.

I promise to carry out those indications and measures indicated by the health authorities.

And for the record for the appropriate purposes, I confirm the veracity of the information provided.

Mark to accept

By accepting you are witnessing the veracity of the answers provided in this questionnaire and all the conditions mentioned in the data protection

Save

Previous Finish

FORM COMPLETED CORRECTLY/QR CODE

- You have now completed the FCS form and should receive an email from spthm@puertos.es that contains a PDF with a QR code associated with your trip (please check your junk/spam folder for the email).
- This QR code will be checked at the Spanish border so please download onto your device.





FAST CONTROL

GREEN

Identificador de formulario

APDUruPCsqonSjs

Fecha de llegada

13-10-2021

Nombre del buque

Seven Seas Splendor

Nº de asiento / camarote

343

País de origen

Italy

Umbria

Nombre y apellidos

James

Arnold

Pasaporte / N° de identificación

123456



Este documento es personal e intransferible, debe ser presentado de forma obligatoria en el control sanitario del puerto de destino. Deberá seguir las instrucciones del personal que se encuentra en dicho control en todo momento. Usted es responsable de la información suministrada, y que forma parte de este documento, así como de la custodia del mismo. Le recomendamos su destrucción tras haber sido mostrado en el control sanitario del puerto.

RECUERDE: Si usted viaja a España, se compromete a llevar a cabo todas aquellas indicaciones y medidas que le indiquen las autoridades sanitarias. También se compromete al cumplimiento de las medidas higiénico-sanitarias establecidas por las mismas, que puede consultar en la web del Ministerio de Sanidad de España.

En particular, se compromete a que si durante los 14 días posteriores a la entrada en España presenta síntomas de infección respiratoria aguda (fiebre, tos o dificultad respiratoria), se auto aislará en el domicilio/lugar de residencia, realizando una auto vigilancia de los síntomas del coronavirus y se pondrá en contacto telefónicamente con las autoridades sanitarias de la comunidad autónoma en la que se encuentre.

Para más información sobre el procedimiento o el tratamiento de los datos personales consulte el portal SpTH de puertos (spthm.puertos.es), o descargue la aplicación móvil "SpTH Marítimo Viajeros".



- Once the email is received, click “Finish” on the FCS form.

Home / Continue the form created previously

Health control form

Progress: 1 2 3 4 5

Form completed correctly APDUruPCsqonSjs

Your form has been saved successfully.

We appreciate the time spent completing this form to make travel safer. In a few moments you will receive an email with the QR Code required to pass the control at the destination port.

REMEMBER to download the QR Code on your mobile or print it on paper and to have it on hand upon arrival in Spain.

We wish you a safe journey and a happy stay in Spain.

Finish