

HEIDENHAIN

Training Class COVID-19 Requirements, Questionnaire & Agreement

In order to resume providing training classes for customers at our location, HEIDENHAIN CORPORATION has taken the following necessary precautions in order to prevent the spread of COVID-19:

- All programming stations in our training room have been placed at least 6 feet apart.
- Hand sanitizer stations are readily available.
- Class size is limited to only four people in order to ensure proper social distancing in both the classroom and in front of the 5-axis machine.

Due to the seriousness of the situation and because your safety and the safety of our employees is top priority, you are required to complete and submit both pages of this form in order to participate in any of our training classes.

! We follow the CDC and CCPH guidelines, and **require** guests to obtain **a negative COVID-19 test result no more than 72 hours prior to arrival at HEIDENHAIN, regardless of vaccination status.**

! **Your state of residence must be actively yellow** at the time of registration based upon the current published **state by state infection map** published by the City of Chicago Emergency Travel order and referenced by Cook County COVID-19 Guidelines.

! The map guidance should be verified again 24 hours prior to arrival at HEIDENHAIN. **Visitation may be declined** by the host if the status of the origin state has changed to **orange**.

! We **must** receive this completed questionnaire agreement **at least one business day prior to your arrival at our location.**

1. Have <u>you</u> been diagnosed with COVID-19, exhibited COVID-19 symptoms*, or been ordered to stay home due to household COVID-19 concerns in the past 30 days?	Yes	No
2. Has <u>anyone in your household or on staff at your facility</u> been diagnosed with COVID-19, exhibited COVID-19 symptoms*, or been ordered to stay home due to household COVID-19 concerns in the past 30 days?	Yes	No
3. Have <u>you</u> traveled by air to any known "hotspots" inside or outside of the U.S. in the past 30 days?	Yes	No
4. Has <u>anyone in your household or on staff at your facility</u> traveled by air to any known "hotspots" inside or outside of the U.S. in the past 30 days?	Yes	No
5. Do <u>you</u> or <u>anyone in your household</u> or <u>any of your staff at your facility</u> plan to travel to a known "hot spot" within two weeks prior to the HEIDENHAIN training class that you plan to attend?	Yes	No
6. Are <u>you</u> or <u>anyone in your household</u> awaiting the results of a COVID-19 test?	Yes	No

*COVID-19 Symptoms

Any one of the following symptoms that cannot be directly related to another underlying/current health condition, such as allergies: cough, shortness of breath or difficulty breathing, fever (100.4° F or above)

Or any two of the following symptoms: chills, repeated shaking with chills, muscle pain, headache, sore throat, new loss of taste or smell

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Do you agree to comply with each of the following regulations during your visit to our location?

(NOTE: If you don't follow these rules, HEIDENHAIN CORPORATION has the right to exclude you from class and will not issue you a refund for the class fee.)

- | | | |
|---|------------|-----------|
| a. Your temperature will be taken daily upon entering our building. | Yes | No |
| b. You will wear a mask at all times while inside our building, unless actively eating or drinking.
(NOTE: If you step outside on a break, your mask may be removed as long as you maintain a 6-foot social distance from others.) | Yes | No |
| c. You agree to stay within a predefined area when in our building. | Yes | No |
| d. You agree to complete a COVID-19 questionnaire every time you enter our building. | Yes | No |

Do you agree that you will not hold HEIDENHAIN CORPORATION liable if you should test positive for COVID-19 after attending one of our training classes?

Yes **No**

Company Name

Signature

Customer Name

Send your completed form via email to sgilmore@heidenhain.com. Or fax it to Sandy Gilmore's attention at 847-843-2380.