

HEIDENHAIN

Training Class COVID-19 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 this questionnaire/agreement in order to participate in any of our training classes. **We must receive your completed form at least one day prior to your date of 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 or anyone in your household or 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 or anyone in your household</u> awaiting the results of a COVID-19 test?	Yes	No
7. 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. (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
8. Do you agree that you will <u>not</u> 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

*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