



Visitor's Health Screening, Facility Tour Safety Rules & Liability Release

Welcome to Avid Controls, Inc.

Before touring or working at the facility please read and review the COVID-19 Visitor Daily Health Screening and Visitor's Facility Safety Rules & Liability Release. Safety is always Avid Controls, Inc.'s uppermost concern and it is extremely important for you to follow the safety rules presented here today. Prior to entering the production area please obtain all necessary PPE from the tour guide.

COVID-19 - VISITOR DAILY HEALTH SCREENING

If you are visiting Avid to perform activities, such as maintenance type work, you must adhere to the following guidelines:

- You must confirm that your temperature is 100.3 degrees or lower, you do not have any COVID 19 related symptoms and that you have not had direct exposure to someone with or suspected to have COVID 19 prior to coming onsite. You are also required to notify us immediately if any of your workers who were at an AVID CONTROLS, INC. facility test positive for COVID 19 after leaving the facility.
- Inform your AVID CONTROLS, INC. point of contact if any of have travelled to destinations with a CDC level 2 (ongoing community transmission and special precautions for high risk travelers) or 3 (countries with widespread transmission) advisory within the last 21 days. These individuals will not be allowed on site without a work clearance.
- For individuals required to visit AVID CONTROLS, INC. for an extended period of time, we will monitor your temperature daily as we require all employees to have daily temperature checks each morning.

We appreciate your cooperation and understanding to help keep our employees, visitors and customers healthy. Together, we can help slow the spread of this and other respiratory infections (including flu and colds) by taking every day preventative actions, including:

- **Masks and/or face coverings** are not a mandated requirement in Waller County and should be used at your discretion. To minimize potential member-to-member exposure, if you are involved in a meeting room with more than 10 people, we require the wearing of a mask and/or face covering. Avid will provide masks to individuals who need them.
- **Wash your hands** frequently using soap and water. If soap and water are unavailable, use an alcohol-based hand sanitizer (available in Main Office and throughout facility). A personal size hand sanitizer is available upon request.
- **Avoid touching eyes, nose, and mouth.** Hands may touch surfaces and pick up viruses. Once contaminated, hands can transfer the virus to eyes, nose, or mouth, and the virus can enter your body from there.
- **Practice good respiratory hygiene.** Cover your mouth or nose with your bent elbow or tissue when you cough or sneeze. Then dispose of the tissue immediately.
- **Seek medical care early if you have fever, cough, and difficulty breathing.** Follow your doctor's instructions for care.
- **Stay home if you are sick.** The Centers for Disease Control recommends staying home at least 24 hours after a fever is gone.

- **Maintain social distancing/meeting guidelines.** Maintain at least six feet between yourself and anyone who is coughing or sneezing., face-to face meetings should be conducted using remote conferencing capabilities, where practical.

I understand that based on the reason for my visit to the AVID CONTROLS, INC. facility, there may be additional health and safety requirements, as directed by AVID CONTROLS, INC., that I must follow.

I have read the AVID CONTROLS, INC. Visitor Daily Health Screening in its entirety. I understand and will follow the policies, including performing and adhering to the required guidelines. I will only enter facility if I have no symptoms or direct exposure.

Company Representing: _____ Purpose of Visit: _____

Written Name/ Signature: _____ Date: _____

Facility Tour Safety Rules:

1. Do not enter production areas unless you are authorized to do so. Visitors must be escorted by an Avid Controls, Inc. representative. If for any reason that you must leave your tour group, please let your tour guide know so you can be escorted safely.
2. When entering the facility, three pieces of Personal Protective Equipment are always required: (1) safety glasses (2) hearing protection, and (3) closed toe shoes. Workers on the floor must wear steel toe shoes. Avid Controls, Inc. will provide slip-on steel toe shoes if not worn.
3. Avid Controls is electronics manufacturing facility and electrical testing under high voltage is present. Do not touch or walk near any test stand during operation at any time, under any circumstances.
4. Stay in designated aisles and walkways. Keep your distance from machinery and equipment. Some machinery and materials move automatically.
5. Do not touch any equipment under any circumstances as there may be sharp edges and injury will occur.
6. Stay within the yellow lines on the floor marked for walkway and do not step or walk outside of these lines as production activities are occurring and should not be interrupted. If you accidentally walk within a production area be aware of materials, tools and objects on the floor. Trip hazards are present. Look where you are going. Watch where you are walking and remove yourself from this area immediately.
7. Watch for hazards to your head from overhead storage of materials and people working at elevated heights. Keep a wide berth from people working overhead. Stay away from the potential falling object/strike zone.
8. Watch for forklifts traveling throughout the facility. Stop at blind corners to look and listen for forklifts.
9. Be aware of materials being moved by overhead cranes and keep a wide distance from suspended loads. Do not get near materials that are being moved. Do not walk under any type of suspended load.
10. Be aware of storage of materials. Do not walk in, on or in-between stacked or stored materials. Avoid any materials that are leaning or unkempt.
11. Stay alert and obey all safety messages and be mindful of muster points as advised by the HSE Manager during safety orientation. Note that, although not required, we have ear protection stations throughout the facility if required.

I, acknowledge that I have read and review the Visitors Facility Safety Rules & Liability Release of Avid Controls, Inc.. I understand that I will be participating in the facility tour at my sole and own risk. By signing my name, I am indicating my acceptance to the following: I understand, agree, warrant and covenant as follows: By participating in this Facility Tour, I agree that I will abide by all Safety Rules. I agree to hold harmless Avid Controls, Inc. (and all of its representatives, employees, Board of Directors, agents, parent company, collectively Avid Controls, Inc.) responsible for any injuries or incidences incurred through my participation and activities related to the Facility Tour.

I FURTHER AGREE to release and forever discharge from any and all known and unknown damage, injury, death, loss, liability, claims, penalties, actions, cause of actions, and judgments of every kind and description. YOU UNDERSTAND THAT PARTICIPATION IN A FACILITY TOUR WHICH IS IN OPERATION IS POTENTIALLY HAZARDOUS, AND THAT PARTICIPATION IN THE FACILITY TOUR CARRIES WITH IT CERTAIN INHERENT RISKS THAT CANNOT BE ELIMINATED COMPLETELY RANGING FROM MINOR INJURIES TO CATASTROPHIC INJURIES INCLUDING DEATH. YOU UNDERSTAND AND AGREE THAT IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN THE FACILITY TOUR, YOU AND ANY HEIRS PERSONAL REPRESENTATIVES OR ASSIGNS OF YOU DO HEREBY RELEASE, WAIVE, DISCHARGE AND CONVENANT NOT TO SUE AVID CONTROLS, INC. FOR ANY AND ALL LIABILITY FROM ANY AND ALL CLAIMS ARISING FROM PARTICIPATION IN THE FACILITY TOUR BY YOU. BY INDICATING YOUR ACCEPTANCE OF THIS WAIVER, YOU ARE AFFIRMING THAT YOU HAVE READ AND UNDERSTAND THIS WAIVER AND FULLY UNDERSTAND ITS TERMS. YOU UNDERSTAND THAT YOU ARE GIVING UP SUBSTANTIAL RIGHTS, INCLUDING THE RIGHT TO SUE. YOU ACKNOWLEDGE THAT YOU ARE SIGNING THE AGREEMENT AND WAIVER FREELY AND VOLUNTARILY, AND INTEND BY YOUR ACCEPTANCE TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW

I further understand that NO CAMERAS, VIDEO RECORDERS OR TAPE RECORDERS ARE PERMITTED on the Facility Tour.

Company		Purpose	
Representing:	_____	of Visit:	_____
Written Name/ Signature:	_____	Date:	_____