



## Visitor Notice and Acknowledgment

1. The undersigned acknowledges that he/she is visiting the campus of Sanford Burnham Prebys Medical Discovery Institute (“the Institute”); and the undersigned is doing so with the approval of the following Institute personnel to visit \_\_\_\_\_, and not as an employee of the Institute.

2. In connection with the coronavirus disease 2019 (COVID-19) pandemic situation, the Institute has modified its operations to ensure the safety of everyone on site, and implemented new health and safety guidelines. Visitors that are on the Institute campus for business purposes are required to follow the same guidelines including being fully vaccinated, outlined in the attached Institute Campus Access Attestation for Visitors.

3. Although the Institute is requiring all on-site employees to follow strict health and safety guidelines, there is no sure way for the Institute to know if an employee might be infected and therefore might pose a risk of infecting other people on campus, including the Visitor.

4. The Institute is allowing Visitors to exercise their own best judgment as to whether or not to come on the Institute campus. However, a precondition to performing such visit is that the undersigned agrees to the terms of this Notice and Acknowledgment. This document must be signed and returned to the Institute prior to the visit.

5. If the Visitor does elect to come on the Institute campus, he/she acknowledges the risks of possibly contracting COVID-19 while at the Institute campus. By so visiting at the Institute campus, the Visitor assumes this risk and waives any right to make any claims related to COVID-19 against the Institute or any of its employees or personnel.

The undersigned hereby agrees to the terms of this Notice and Acknowledgment, including without limitation the waiver in Section 5 above.

### **Acknowledged and Agreed,**

On-site Visitor:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Print Name: \_\_\_\_\_



## **PLEASE READ**

### **Campus Access Attestation for Visitors**

To do our part in preventing the spread of COVID-19 in our workplace, **only fully-vaccinated visitors** may enter our campus buildings. We ask that you **wear a face covering and remain on campus only as long as necessary**. We also restrict access to our campus for anyone who may have recently been exposed to the virus.

*Please read carefully:*

**By entering our campus, you are affirming and attesting that:**

1. You do not have any of the following symptoms that can indicate possible COVID-19:
  - Fever ( $\geq 38^{\circ}\text{C}/100^{\circ}\text{F}$ ) or chills
  - New onset cough
  - Shortness of breath/difficulty breathing
  - Fatigue
  - Muscle or body aches
  - Headache
  - New loss of taste, smell or appetite
  - Sore throat
  - Congestion or runny nose
  - Nausea or vomiting
  - Diarrhea
2. You have not received a positive COVID-19 test result in the past 10 days.
3. You have sent a copy/scan of your COVID-19 vaccination record to [hrconfidential@sbspdiscovery.org](mailto:hrconfidential@sbspdiscovery.org) or shown it to your host/Institute Security.

If you cannot affirm any of the above statements,  
**you may NOT enter our campus or any campus building.**

*Thank you for helping to ensure the health & safety of our campus community.*