



Acknowledgement Form for Receipt of Face Mask Issued by Westgate Resorts

Name: _____ TM #: _____

Department: _____

I, _____, hereby acknowledge the receipt of a face mask issued by Westgate Resorts for my use at work during the COVID-19 Pandemic.

I acknowledge and understand this mask is to be used during my assigned shift hours. If the mask becomes damaged or otherwise unusable, I acknowledge that, in order to receive a replacement mask, I must return the previous mask issued to me.

Furthermore, I acknowledge that Westgate Resorts¹ can neither independently certify nor guarantee that this mask will completely prevent any virus transmittal including, but not limited to, COVID-19. Westgate Resorts is not liable for any issues arising or relating to the use (whether directly or indirectly) of the mask including, but not limited to, transmittal of any virus.

Westgate Resorts has provided this mask consistent with the April 3, 2020 guidelines issued by the Centers for Disease Control and Prevention (CDC) regarding mask use: "CDC recommends wearing cloth face coverings in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies) **especially** in areas of significant community-based transmission." The wearing of a mask is not intended to replace social distancing, which should ideally be practiced even while wearing a mask.

Failure to return mask or any misuse of property issued by Westgate Resorts, may result in disciplinary action up to and including termination of employment.

Signature: _____ Date: _____

¹ For the purposes of this form, Westgate Resorts includes but is not limited to CFI Resorts Management, Inc., Westgate Marketing, LLC., Westgate Resorts, LTD., and its subsidiaries, affiliates, and parent companies.