

Acknowledgement Form for Receipt of Face Mask Issued by Westgate Resorts

Name:	TM #:
Department:	
	acknowledge the receipt of a face mask issued by Westgate Resorts for
_	nask is to be used during my assigned shift hours. If the mask becomes wledge that, in order to receive a replacement mask, I must return the
mask will completely prevent any virus tra	te Resorts ¹ can neither independently certify nor guarantee that this cansmittal including, but not limited to, COVID-19. Westgate Resorts is to the use (whether directly or indirectly) of the mask including, but not
Disease Control and Prevention (CDC) requiblic settings where other social distance pharmacies) especially in areas of significations.	consistent with the April 3, 2020 guidelines issued by the Centers for garding mask use: "CDC recommends wearing cloth face coverings in ting measures are difficult to maintain (e.g., grocery stores and ant community-based transmission." The wearing of a mask is not ich should ideally be practiced even while wearing a mask.
Failure to return mask or any misuse of po to and including termination of employme	roperty issued by Westgate Resorts, may result in disciplinary action upent.
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.