

Coronavirus (COVID-19)

Confirmation for Local Guides, Airport Representatives and Local Drivers

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| Code/Departure: | |
| Local Guides / Airport Representatives / Local Drivers: | |

The safety and health of our guests and team is our number one priority. As such, we have implemented the following COVID-19 Pre-Trip screening.

- You have not been diagnosed with COVID-19 in the last 14 days.
- You have assessed yourself for COVID-19-related symptoms, and have experienced none of the following in the last 14 days:
 - Known temperature of 38 C/100.4 F or higher
 - Cough (excludes symptoms from a pre-existing condition)
 - Shortness of breath/difficulty breathing (excludes symptoms from a pre-existing condition)
 - Chills
 - Muscle pain (unrelated to a specific activity or incident)
 - Sore throat
 - Diarrhoea, vomiting and/or nausea
 - Recent loss of taste or smell
- You have not been denied boarding by an airline due to COVID-19 exposure in the last 14 days.

I _____ (print full name) confirm that I comply with the above policy and I do not have any of the above symptoms.

Tick to confirm you have a valid Covid-19 EU Digital Covid Certificate.

It is your duty to contact the relevant Operations office immediately should you become aware that you have been in close contact with someone who tested positive or if you show any of the above-mentioned symptoms. GFOB follows the regulations in each country where you live / work and the decision on whether you can render services on the assigned tour / cruise will be based on the above. For example, a Local Guide / Airport Representative / Local Driver has tested positive or has been in close contact with a positive case we will follow local regulations: (see example below)

- If you are positive you should isolate for 7 days -> then from the 8th day if cleared you can render your services to GFOB
- If you have been in contact with a positive person, you do not have to quarantine or isolate, but monitor yourself -> in a case like this you should test yourself prior to offering your services to GFOB: if negative you can work for GFOB

Thanks a lot for your collaboration.

Signature _____

Date _____