

ALPHA OMICRON PI

Properties

COVID-19 ACKNOWLEDGEMENT OF PERSONAL RESPONSIBILITIES AND EXPECTATIONS

As a member of Alpha Omicron Pi Fraternity, I understand my responsibility to be compliant with COVID-19 health guidelines in my interactions with other members, volunteers, and employees. This includes handwashing, social distancing, cough hygiene, self-screening, and other precautions and practices recommended by and available from the Centers for Disease Control and Prevention ("CDC") at <https://www.cdc.gov/coronavirus/2019-ncov/index.html>. Further, we recommend wearing a face mask in common areas. If the CDC issues revised guidance on face masks, or any applicable federal, state or local authority requires face masks, face masks will be required at the AOII facility, too. Though the COVID-19 vaccine is not required for members, it is strongly encouraged for the health and well-being of all members, volunteers, employees and guests.

As a member of AOII, I recognize and understand that preventing the spread and reducing my risk of contracting the COVID-19 virus involves continual personal decisions and precautions. I recognize and understand that guidance on how to protect myself and others from COVID-19 is available at <https://www.cdc.gov/coronavirus/2019-ncov/index.html> and through federal, local, and state recommendations and/or regulations. I understand that this guidance can change, and that I have a *personal responsibility* to stay abreast of the changing information found on these COVID-19 guidance resources. *I also understand that it is my personal responsibility to follow the guidance provided by these reputable sources.*

I recognize and understand that guidance on how to protect myself from the COVID-19 virus and how to avoid spreading the virus to my chapter members and others, is available at <https://www.cdc.gov/coronavirus/2019-ncov/index.html> and includes the following:

- Knowing how COVID-19 spreads
- Thoroughly washing my hands often
- Putting distance (maintaining 6 feet) between myself and other people
- When to cover my nose and mouth with a cloth (face mask)
- Cleaning and disinfecting frequently touched surfaces
- Monitoring my health

Should I begin to display symptoms of COVID-19, I agree to share this information about my symptoms with my Chapter President and House Director (if applicable). I further agree to get tested, as soon as practicable and at my expense, for COVID-19, and to share the test results with my Chapter President and House Director. This information will remain confidential and shared only with your chapter's Assistant Director of Properties unless disclosure is required by law. Should I test positive, I understand and agree that it is in my best interests and the best interests of my chapter sisters living in that I find an alternate living space to isolate/quarantine, and I agree to do so. Upon moving out of the facility, I will not be billed for room and board during this period but will be billed development fees until I return to the facility full time. Should an alternate living space not be an option, I agree to isolate/quarantine in the AOII facility and agree to abide by all recommendations of the CDC during this time.

Due to the current global health emergency, I understand and agree that at any time should my behavior or actions pose a health or safety risk to other residents of the facility, I may be asked to leave until further notice or permanently, and I agree to do so. I acknowledge that I will continue to pay out the



cost of my in-house agreement with AOII as I would be the one in default of the agreement.

Further, I understand and agree that my chapter's standards board, chapter leadership, and AAC can impose consequences locally due to my behavior or actions should my behavior or actions pose a health or safety risk to others.

I will educate myself on the symptoms, prevention and spread of COVID-19 (available at <https://www.cdc.gov/coronavirus/2019-ncov/index.html>).

I agree to follow this guidance while in and outside the chapter house and to follow this guidance for any group and chapter functions. I understand that my actions both in and outside of the chapter house can have significant impact on my sisters and those around me.

I agree to uphold the standards and practices of Alpha Omicron Pi Fraternity.

Dated: _____, 2021

Signature

Printed name

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