

Visitor Agreement

Welcome to the NCI at Frederick and Frederick National Laboratory for Cancer Research (FNL). Visitors are welcome to visit during hours of operations. For your safety and security, we have the following guidelines:

1. Agree to follow the NCI at Frederick and FNL rules before entry is permitted into our facilities.
2. Foreign national visitors that are not U.S. Permanent Residents must be escorted while on the campus.
3. All visitors must sign in at EHS Protective Services or at the conference center if attending a conference.
4. All visitors are required to read and acknowledge the Non-Disclosure and Waiver Agreement.
5. **Smoking/tobacco use is prohibited** in our facilities and on the property. This includes the use of all tobacco products, vaping, etc.
6. Firearms are prohibited in our facility and on our property. Firearms on a federal property are subject to federal arrest and prosecution.
7. **No photography or videography** on campus without written permission from EHS Protective Services.
8. **No entry into animal facilities** without an escort from the Animal Facility Staff.
9. In the event of an emergency, follow signage (or others) to the designated assembly point outside of the building and listen for further instructions.

I understand that various hazards to include animal allergens are present in this workplace, and that I have received and reviewed a copy of the EHS Visitor’s Guide. I agree to conform to any applicable safety and security requirements, to include wearing appropriate personal protective equipment brought to my attention by any employee or signs posted in the areas I visit while on the premises and to observe other reasonable safety precautions. For construction work or equipment service, I also agree to abide by any safety plans and procedures required by my employer and those I am working under as submitted by my organization for acceptance.

FIRST NAME:	LAST NAME:	DATE:
CELL PHONE NUMBER:		
BUILDING(s) VISITING TODAY:		
REPRESENTING (Name of Company, Organization, University, or Self, etc.):		
SIGNATURE:		
EHS PROTECTIVE SERVICES USE ONLY		
ID REVIEWED ___ Driver’s License ___ Passport State or Country: _____ Expiration Date: _____		
<input type="checkbox"/> ESCORT REQUIRED – ANIMAL FACILITY OR RESTRICTED AREA	<input type="checkbox"/> MANUAL DOOR UNLOCK PERMISSION (only for construction or service vendor if authorization document from sponsor is available)	
<input type="checkbox"/> ESCORT REQUIRED – Non-US Citizen or Permanent Resident	<input type="checkbox"/> STATE SPONSOR OF TERRORISM – HHS APPROVAL REQUIRED. Received? ___ Yes ___ No	
Authorizing Document Received? ___ Yes ___ No	Verified Fort Detrick Access Pass? ___ Yes ___ No	
Visitor Badge Number:		
Reviewed by:		