

WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate on behalf of 2022 Dam to Dam Relay and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS (Dam to Dam Relay) their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I agree to the following:

In the past 24 hours, you have not had one of the following symptoms unrelated to a pre-existing medical condition: frequent cough or shortness of breath?

In the past 24 hours, you have not had TWO of the following symptoms unrelated to a pre-existing medical condition: sore throat, chills, headache, muscle pain, new loss of taste or smell.

In the past 24 hours, you have not experienced a fever of 100.4°F or above.

You have not been in close physical contact with someone who tested positive for COVID-19 within the past 14 days.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Team Name: _____

Team Members:

Name _____ Signature/ Guardian: _____ Date: _____

Name _____ Signature/ Guardian: _____ Date: _____

Name _____ Signature/ Guardian: _____ Date: _____

Name _____ Signature/ Guardian: _____ Date: _____

Name _____ Signature/ Guardian: _____ Date: _____

Name _____ Signature/ Guardian: _____ Date: _____