

Business Reopening Health Risk Waiver

In consideration of being permitted to enter and participate in activities at [Business Name], I acknowledge and agree to the following:

Assumption of Risk

I understand that while [Business Name] has implemented all recommended precautionary measures to minimize the spread of communicable illnesses, including COVID-19, an inherent risk of exposure still exists in any public space. I voluntarily assume all risks related to exposure or infection.

Release and Waiver

I, for myself and on behalf of my heirs, executors, and assigns, hereby release, discharge, and hold harmless [Business Name], its owners, employees, and representatives from all claims or liabilities arising out of exposure to illness, injury, or other health conditions, whether such exposure occurs before, during, or after my presence at the facility.

Compliance with Protocols

I agree to follow all guidelines, instructions, and posted protocols intended to protect guests and employees. Failure to comply may result in removal from the premises.

By signing below, I acknowledge that I have read, understand, and accept all of the terms of this Health Risk Waiver.

Signature

Printed Name

Date