

## **Coronavirus (COVID-19) Hold Harmless Agreement**

This Hold Harmless Agreement ("Agreement") is entered into by and between:

**Participant Name:** \_\_\_\_\_

**Event/Location:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### **Assumption of Risk**

I acknowledge the contagious nature of the Coronavirus/COVID-19 and voluntarily assume the risk that I, my family members, or other contacts may be exposed to or infected by attending, visiting, or participating at the above event or location. I understand that such exposure or infection may result in personal injury, illness, permanent disability, and death.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury, illness, damage, loss, claim, liability, or expense, of any kind, that I may experience or incur in connection with attendance or participation.

### **Release and Waiver**

I hereby release, discharge, and hold harmless [Organization Name], its owners, directors, employees, volunteers, and agents from any claims, liabilities, actions, damages, costs, or expenses of any kind arising out of or relating thereto.

- I certify that I am not experiencing symptoms of COVID-19 (such as cough, shortness of breath, fever, chills, loss of taste or smell) on the day of participation.
- I confirm that, to my knowledge, I have not been in close contact with a confirmed or suspected case of COVID-19 within the past 14 days.

### **Agreement**

I certify that I have read and fully understand this Agreement. I understand that by signing this form, I am waiving certain legal rights, including the right to sue [Organization Name] and its representatives.

Participant Signature:

Print Name:

Date:

Parent/Guardian Signature (if under 18):