

COVID-19 Waiver of Liability Form

In consideration for being permitted to enter and participate in activities at the workplace, I, the undersigned, acknowledge and agree to the following:

1. I am aware of the ongoing COVID-19 pandemic and understand there are inherent risks associated with exposure to the virus in any public or workplace setting.
2. I voluntarily assume all risks related to potential exposure to COVID-19 while on the premises.
3. I agree to comply with all workplace guidelines and protocols implemented to reduce the spread of COVID-19, including any health screenings, mask policies, and physical distancing measures.
4. I certify that I am not currently exhibiting symptoms of COVID-19 (such as cough, fever, chills, difficulty breathing, or loss of taste/smell), and that I have not had close contact with anyone confirmed or suspected to have COVID-19 within the last 14 days unless following public health guidelines for return.
5. I hereby release and hold harmless the Company and its employees, managers, directors, and affiliates from any and all liability, claims, or demands related to COVID-19 infection, except as may result from gross negligence.

Employee Information

Name:

Department:

Date:

Signature: