

COVID-19 Event Participation Waiver

Assumption of Risk

I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by participating in this event. I understand that the risk of becoming exposed to or infected by COVID-19 may result from the actions, omissions, or negligence of myself and others, including but not limited to, event staff, volunteers, and participants.

Release of Liability

I hereby release, waive, and discharge the event organizers, sponsors, and their representatives from any and all liability, claims, or demands relating to COVID-19 illness or infection that may result from my participation in this event.

Attestation

- I am not experiencing any symptoms of COVID-19, including cough, fever, shortness of breath, or loss of taste or smell.
- I have not, to my knowledge, been in close contact with anyone with COVID-19 in the past 14 days.
- I will comply with all event rules regarding safety, including wearing masks, observing social distancing, and sanitizing hands as required.

Agreement

I have read and understand the above waiver and agree to comply with all safety measures. I certify that I am at least 18 years old or, if under 18, that this waiver is signed by my parent/guardian.

Participant Name:

Date:

Signature:

Parent/Guardian (if under 18):
