**Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19**

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization**. COVID-19 is extremely contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

***“Enter Business Name Here*”** has put in place preventative measures to reduce the spread of COVID-19; however, “***Business Name Here”*** **cannot guarantee** that you will not become infected with COVID-19. Further, entering the facility could increaseyour risk and of contracting COVID-19.

By signing this agreement, 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 entering the facility and that such exposure or infection may result in personal injury, illness, permanent disability, and/or death. I understand that the risk of becoming exposed to or infected by COVID-19 at“***Business Name Here”*** may result from the actions, omissions, or negligence of myself and others, including, but not limited to; owners, employees, volunteers, clientele, and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I may experience or incur in connection with attendance at “***Business Name Here”*** (“Claims”). I hereby release, covenant not to sue, discharge, and hold harmless “***Business Name Here”***, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of “***Business Name Here”***, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after visiting “***Business Name Here”***

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Signature Date

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Print Name

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Authorized Employee/Owner Signature Date

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Print Name