CORONAVIRUS/COVID-19

ASSUMPTION OF RISK AND RELEASE OF LIABILITY

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. Plymouth Township has put in place preventative measures to reduce the spread of COVID-19 at its programs. However, Plymouth Township **cannot guarantee** that you or any minors in your care will not become infected with COVID-19. Further, participation and attendance at the Township's programs could **increase** your, or any minors in your care, risk of contracting COVID-19.

READ CAREFULLY BEFORE SIGNING-PLEASE SIGN AND INITIAL WHERE INDICATED

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk for myself and/or for any minors in my care that may be exposed to, or infected by, COVID-19 by participation in Plymouth Township programs and that such exposure or infection may result in personal injury, illness, permanent disability, and death;

	INITIALS:	
I understand that the risk of becoming exposed to, or infect actions, omissions, or negligence of myself and others, incagents, representatives program participants and their fam	cluding, but not limited to, Plymouth Township, its em	
	INITIALS:	
I voluntarily agree to assume all of the foregoing risks and care: including, but not limited to, personal injury, disabili I or minors in my care may experience or incur due to CO programs;	ity, death, illness, damage, loss, claim, liability, or exp	ense of any kind, that
F6,	INITIALS:	
On behalf of myself and minors in my care, I hereby releast its employees, volunteers, agents, and representatives, of a or expenses of any kind arising out of or relating thereto. I actions, omissions, or negligence of Plymouth Township, infection occurs before, during, or after participation in a H	and from the Claims, including all liabilities, claims, ac I understand and agree that this release includes any Cl its employees, volunteers, agents, and representatives,	ctions, damages, costs laims based on the
	INITIALS:	
In the event that I, or a minor in my care, files a lawsuit, I substantive law of that state shall apply. I agree that if any remaining portions shall remain in full force and effect.		
remaining portions shall remain in run rotee and effect.	INITIALS:	
By signing this document, I agree that if I, or a minor in m Plymouth Township programs, then I, or any minor in my of any minor in my care to maintain a lawsuit against the p	care, may be found by a court of law to have waived i	ny right or the rights
	INITIALS:	
If I have signed a separate release of liability for myself or programs, I agree that the terms of that waiver are wholly incorporated into the separate release of liability waiver.	incorporated into this document and that the terms of t	
	INITIALS:	
Participant Name (Print):	Date:	
Parent/Guardian Name (Print):		
Parent/Guardian Signed:		

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