



Assumption of 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. 50 North has put in place preventative measures to reduce the spread of COVID-19. However, 50 North cannot guarantee that you will not become infected with COVID-19.

READ CAREFULLY BEFORE SIGNING-INITIAL EACH PARAGRAPH

____**INITIALS** 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 participation; and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at 50 North may result from the actions, omissions, or negligence of myself and others, including, but not limited to 50 North employees, volunteers, members or community at-large.

____**INITIALS** 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, or any kind, that I may experience or incur in connection with my participation at 50 North. On behalf, I hereby release, covenant not to sue, discharge, and hold harmless 50 North, its employees, agents, and representatives, of and from the Claims, including all, and agree that this includes any Claims based on the actions, omissions, or negligence of 50 North, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation at 50 North.

____**INITIALS** I represent that I have adequate insurance to cover any injury or illness I may suffer or cause while participating in this organization's activities, or else I agree to bear the cost of such injury or illness myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume – and bear the cost of – all risks that may be created, directly or indirectly, by any such condition.

____**INITIALS** By signing this document, I agree that if I am exposed or infected by COVID-19 during my participation in the organization's activities, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

____**INITIALS** I have had sufficient time to read this entire document and should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in the organization's activities would be significantly greater if I were to choose not to sign this release and agree that the opportunity to participate at the stated cost in return for the execution of this release is a reasonable bargain. I have read and understood this document and I agree to be bound by its terms.

____**INITIALS** If I have signed a separate general waiver of liability connected to my participation at 50 North, I agree that the terms of that waiver are wholly incorporated into this document and that the terms of this document are incorporated into the separate general waiver.

____**INITIALS I AGREE THAT I WILL PRACTICE SAFE SOCIAL DISTANCING AND CLEAN HYGIENE DURING MY PARTICIPATION AT 50 NORTH.**

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____ **INITIALS** I understand the risks of participation as stated in the Director's Order from the State of Ohio that:
"Elderly people and those who are vulnerable as a result of illness should take additional precautions. People at high risk of severe illness from COVID-19, including elderly people and those who are sick, are urged to stay in their residence to the extent possible except as necessary to seek medical care. According to CDC, the risk of severe illness from COVID-19 increases as people grow older and those at high-risk of severe illness from COVID-19 also include people of all ages with underlying conditions, particularly if not well controlled including:

- a. people with chronic lung disease or moderate to severe asthma,
- b. people who have serious heart conditions,
- c. people who are immune compromised,
- d. people with severe obesity (BMI of 30 or higher),
- e. people with diabetes,
- f. people with chronic kidney disease undergoing dialysis,
- g. people with liver disease.

____ **INITIALS** I understand that I will need to be tested for COVID-19, at my own expense, if I present symptoms of COVID-19.

Name _____ Signature _____

Date _____ Telephone _____