



Mondays @ Calvary Liability Waiver and Assumption of Risk

Please write your name on page 2, sign on page 3, and email back to abains@calvarypalisades.org prior to your arrival on Monday.

Thank You! We look forward to seeing you soon!

COVID-19 LIABILITY WAIVER AND ASSUMPTION OF RISK

The novel coronavirus, COVID-19, is a highly infectious, life-threatening disease declared by the World Health Organization to be a global pandemic. There is no current vaccine or medication for COVID-19 or its related illnesses (“COVID-19”). COVID-19’s highly contagious nature means that exposure to others or contact with surfaces that have been exposed to the virus can lead to infection. Individuals who have COVID-19 may not show any symptoms, even if they are contagious. It is currently very difficult to control the spread of COVID-19 or to determine whether, where, or how a specific individual may have been exposed to the disease. For more information on COVID-19, visit the websites of the Centers for Disease Control and Prevention (<https://www.cdc.gov/coronavirus/2019-ncov/index.html>) or the California Department of Public Health (<https://covid19.ca.gov/>).

Aware of the foregoing, I _____, am voluntarily agreeing to attend campus for the ‘Mondays @ Calvary’(hereinafter “Mondays”).

I understand that Calvary Church Pacific Palisades (hereinafter “Calvary”) has implemented safety rules and precautions in order to mitigate the spread of COVID-19. However, those measures do not completely protect against the spread of COVID-19. Moreover, it may not always be possible for everyone to follow social distancing and other precautions.

I agree that I must comply with such rules and precautions which may include, but are not limited to, mask wearing, hand washing, hand sanitizing, and social distancing. I understand that if I fail to comply with these rules and precautions, I may be asked to leave Mondays. I understand these rules and precautions may need to be adjusted as information about COVID-19 evolves. I acknowledge that even if I follow all directions, instructions, and rules and exercise utmost personal care, there will remain a certain irreducible inherent risk to me and I accept that risk.

I agree that if my I am exhibiting symptoms of respiratory illness, a fever of 100.4°F or higher, or any other known symptoms of COVID-19, I will not attend Mondays. I agree that I will immediately inform the Calvary if I, or anyone in my family, tests positive for COVID-19 or has been exposed to anyone who has tested positive for COVID-19 in the prior 14 days.

By signing this agreement, I acknowledge the contagious nature of COVID-19, the fact that it can be difficult to identify, and the inherent risks of being exposed at Calvary to those who may be infected with COVID-19, including Calvary employees, agents, contractors, volunteers, members or other attenders. I voluntarily assume the risk that I may be exposed to or infected by COVID-19 by entering Calvary’s campus and that such exposure or infection may result in personal injury, serious illness, permanent disability, and/or even death.

I understand and acknowledge that given the unknown and evolving nature of COVID-19, it is not possible to fully list each and every individual risk of contracting COVID-19. I

understand that the risk of becoming exposed to or infected by COVID-19 at Calvary may result from the actions, omissions, or negligence of myself and others, including, but not limited to, S Calvary employees, agents, contractors, volunteers, members or other attenders.

I voluntarily assume full responsibility for myself for any and all risks of illness, injury, disability or death associated with exposure to COVID-19, as well as from use of any protective equipment.

To the fullest extent permitted by law, I completely absolve, release, and waive any potential claims I may have against Calvary, its directors, officers, employees, agents, and volunteers ("Released Parties") including, but not limited to, claims for personal injury, disability, illness, damage or death from exposure to COVID-19, whether such exposure occurs during or after my attendance at the Calvary campus or events. Also, I agree, on behalf of myself, my personal representatives and heirs, not to make any type of legal or equitable claim arising from my exposure to COVID-19, against the Released Parties, whether or not it arises through the negligence, omission, or default of Released Parties. I further agree that if any such claim is made against the Released Parties, I will indemnify and defend the Released Parties with respect to any such claim. Such duty of defense shall arise immediately upon tender.

I HAVE READ AND UNDERSTAND THIS AGREEMENT AND I AM AWARE THAT BY SIGNING THIS AGREEMENT I MAY BE WAIVING CERTAIN LEGAL RIGHTS OF MYSELF, INCLUDING THE RIGHT TO SUE. THIS AGREEMENT SHALL BE BINDING UPON ME AND MY HEIRS, MY CHILD, LEGAL REPRESENTATIVES, AND ASSIGNS, AND SHALL INURE TO THE BENEFIT OF THE SCHOOL AND THEIR SUCCESSORS AND ASSIGNS.

YOUR SIGNATURE:

DATE:
