

Homer Athletic Club & Homer Township

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. Homer Athletic Club & Homer Township cannot guarantee that you will not become infected with COVID-19. Further, participation could increase your risk of contracting COVID-19. Please complete a separate waiver for each person.

Participant First and Last Name: _____

Team Name & Level: _____

(If child under 18) Parent/Guardian First and Last Name: _____

Email _____ Phone _____

READ CAREFULLY BEFORE SIGNING - INITIAL EACH PARAGRAPH

___ INITIAL By signing this waiver, 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 Homer Athletic Club activities and events may result from the actions, omissions, or negligence of myself and others, including, but not limited, Homer Township, Homer Athletic Club board members, volunteers, coaches, program participants and their families.

___ INITIAL I voluntarily agree to assume all of the foregoing risks and except 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 my participation with Homer Athletic Club. On my behalf, I hereby release, covenant not to sue, discharge, and hold harmless Homer Township, Homer Athletic Club, it's board members, volunteers, coaches, 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 Homer Township, Homer Athletic Club, it's board members, volunteers, coaches, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation at Homer Athletic Club activities.

___ INITIAL I represent that I have adequate insurance to cover any injury or illness I may suffer or cause while participating in this activity, or else I agree to bear the costs 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.

___ INITIAL By signing this document, I agree that if I am exposed or infected by COVID-19 during my participation in this activity, 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.

___ INITIAL I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. I have read and understood this document and I agree to be bound by its terms.

Signature: _____ Date: _____

Printed Name: _____