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## **Archdiocese of Seattle**

## Waiver of Liability Relating to Coronavirus/COVID-19

PHONE:	EMAIL:		
ACTIVITY/PROGRAM:			
BRIEF DESCRIPTION OF ACTIV			
is reported to be extremely of from person-to-person conta disease. The exact methods of	contagious. The state of medical knact. People reportedly can be infected of spread and contraction are unknown.	e pandemic by the World Health Organization. COVID-19 nowledge is evolving, but the virus is believed to spread ected and show no symptoms and therefore spread the own, and there is no known treatment or cure for COVID otentially life threatening illness and even death.	
presence of the disease. The	COVID-19 while participating in ACT	cannot prevent you [or anyone] from becoming exposed IVITY/PROGRAM. It is not possible to prevent against the in ACTIVITY/PROGRAM you may be exposing yourself to 9.	
the risk of contracting COVII ACTIVITY/PROGRAM of	D-19 for myself and/or my childre	warning concerning COVID-19. I hereby choose to accep n and/or any extended family in order to participate in (Organization). I accept the risk of being cipating in ACTIVITY/PROGRAM.	
trustees, agents, employees, while participating in ACTIVI including for personal injuries negligence and give up any cl	or other representatives in connect TY/PROGRAM. I understand that the s, death, disease or property losses aim I may have to seek damages, w	aive my right to bring suit against and its owners, officers, directors, managers, officials tion with exposure, infection, and/or spread of COVID-19 his waiver means I give up my right to bring any claims of any other loss, including but not limited to claims of the known or unknown, foreseen or unforeseen.	
		TY AS DESCRIBED ABOVE:	
PARTICPANT SIGNATURE:		DATE:	
PARENT/GUARDIAN NAME (	if under 18):		
PARENT/GUARDIAN SIGNAT	URE:	DATE:	
EMERGENCY CONTACT:		PHONE:	