

Assumption of Risk, Release 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 and it has been declared a National Disaster in the United States.

The Environmental Learning Centers of Connecticut (ELCCT) plans to operate Fall for Indian Rock this fall and has put in place preventative measures, based on guidance from the Connecticut Office of Early Childhood, the Centers for Disease Control and Prevention and the Bristol-Burlington Health District, to reduce the spread of COVID-19 and keep our participants, their families and our staff safe. However, ELCCT **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. Further, attending Fall for Indian Rock could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending Fall for Indian Rock 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 Fall for Indian Rock may result from the actions, omissions or negligence of myself and others, including but not limited to, ELCCT employees, volunteers, participants and participant families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my spouse, child(ren) or myself (including but not limited to, personal injury, disability and death), illness, damage, loss claim, liability, or expense, of any kind, that I, my spouse or my child(ren) may experience or incur in connection with my child(ren)'s attendance at Fall for Indian Rock ("Claims"). On my behalf, and on behalf of my children, I hereby release, discharge, and hold harmless ELCCT, its employees, agents, volunteers 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, but is not limited to, any and all Claims based on actions, omissions or negligence of ELCCT, its employees, agents, volunteers and representatives, whether a COVID-19 infection occurs before, during or after participation in Fall for Indian Rock.

I have read this document and had the ability to consult with an attorney of my choosing. I have signed this document freely, voluntarily and with a full understanding of the consequences thereof.

Child Name _____

Parent / Guardian 1 Name _____

Signature _____ Date _____

Parent / Guardian 2 Name _____

Signature _____ Date _____