



COVID-19 Liability Release Waiver

The coronavirus that causes Covid-19 is thought to spread largely through respiratory droplets from coughing and sneezing, and it seems to spread easily. It may also be possible to become infected by touching a contaminated surface or object and then touching one's nose or mouth. I further acknowledge that Atlanta Georgia Relays can not guarantee that I will not become infected with Coronavirus/Covid 19. I understand that I must comply with all set procedures to reduce the spread while attending AGR.

Atlanta Georgia Relays in accordance with The Centers for Disease Control and Prevention require that you initial each statement and by signing below you verify your agreement and adherence:

- I am symptom-free and medically/physically fit to participate.**

No coughing - No sneezing - No symptoms of lower respiratory illness (i.e.: shortness of breath)

- No temperature above 100.4 F**
- No other NEW symptoms listed below which may be associated with COVID-19**

•Fatigue - Muscle aches and pain - Loss of smell or taste - Loss of appetite - Diarrhea or nausea - Sore Throat - Runny Nose

- In the past 2 weeks, I have NOT (or anyone in my household) traveled internationally or domestically. I have not travelled to highly impacted area within the United States in the last 14 days.**



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- **In the past 2 weeks, I have NOT been in close contact with someone under investigation for, or with a confirmed case of Coronavirus Disease 2019 (COVID-19)?**
 - **In the past 2 weeks, I have NOT (or someone in my household) been diagnosed, tested or quarantined under a doctor's orders for COVID-19? Check all that apply:**
 - **A doctor ordered me to quarantine for possible COVID-19 - I was tested and am waiting for my results _____**
 - **I tested positive for antibodies (Date: _____)**
 - **Someone at home has fever, cough or difficulty breathing but has not been diagnosed _____**
 - **A doctor ordered someone in my home to quarantine for possible COVID-19**
 - **Someone in my home tested positive**
 - **PLEASE INDICATE IF THESE QUESTIONS ARE NONE OF THE ABOVE _____**
 - **I will shield any incidental coughs and sneezes with a tissue, elbow, or shoulder (not the bare hands).**
 - **I will take frequent breaks to wash hands with soap and water for at least 20 seconds**
 - **I will not shake hands in order to reduce the risk of spreading infection**
 - **I understand that even in the absence of symptoms, others in attendance could be infectious carriers of Covid-19 and I assume the risk of contracting the virus.**
 - **I agree that this waiver, along with my previously submitted Participation Waiver, Release and Consent Form, is binding.**
 - **I agree to waive liability and assume all risks of participation, and jointly and severally release, covenant not to sue, and agree to fully indemnify and hold harmless to Atlanta Georgia Relay; their respective Instructors/coaches, administrators, employees, agents, contractors, guests, and**



business invitees, and all other participants, parents or instructors/coaches in the Activity with Participant, Coach and Parent, from all claims, loss or liability the Participant, Coach, or Parent may have arisen out of the medical treatment (including but not limited to authorization, but not obligation to, Atlanta Georgia Relays and to their respective authorized agents to consent to emergency medical treatment of Participant. Atlanta Georgia Relays and its agents shall be under any obligation to pay the cost of such treatment) and including of reasonable attorney fees and costs of defense (as well as the costs of enforcing the indemnity provisions of this Release) regardless of whether they are known or unknown and regardless of when they arise, whether before or after the signing of this Release.

_____ Date _____

Participant (Please Print)

Date _____

Participant (Signature)

Parent/Legal Guardian (Please Print) Parent/Legal Guardian (Signature)

If you are a Coach signing for your team/track club, please ensure you received full permission (Coaches can sign for all athletes



with permission from Parent guardian if athlete under 18)

If athlete is under 18 Parent must sign _____