

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. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Beacon Hill School (hereinafter referred to as "the School") has put in place preventative measures to reduce the spread of COVID-19; however the School cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further attending the School 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 children may be exposed to or infected by COVID-19 by attending the School 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 the School may result from the actions, omissions, or negligence of myself and others, including, but not limited to, school employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to children or myself (including, but not limited to, personal injury, disability, and death), illness damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at the School or participation in school programming (hereinafter referred to as "Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge and hold harmless the School, its employees, 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 the School, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any School program.

Signature of Parent/Guardian

Date

Print Name of Parent/Guardian

Name of School Participant(s)