

STONE CRABS SWIM TEAM

COVID-19 Liability and Release Form

I acknowledge the contagious nature of the Coronavirus/COVID-19 and that the CDC and many other public health authorities still recommend practicing social distancing.

I further acknowledge that Stone Crabs Swim Team has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19.

I further acknowledge that Stone Crabs Swim Team cannot guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, staff, other participants and other guests of the hotels.

I voluntarily seek services provided by Stone Crabs Swim Team and acknowledge the contagious nature of the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending any and all Stone Crabs Swim Team events.

I attest that:

- ☐ I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
- ☐ I have not traveled internationally within the last 14 days.
- ☐ I have not traveled to a highly impacted area within the United States of America in the last 14 days.
- ☐ I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.
- ☐ I have not been diagnosed with Coronavirus/Covid-19 and not yet cleared as noncontagious by state or local public health authorities.
- ☐ I am following all CDC recommended guidelines as much as possible and limiting my exposure to the Coronavirus/COVID- 19.

I hereby release and agree to hold Stone Crabs Swim Team harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of Stone Crabs Swim Team, or that may otherwise arise in any way in connection with any services received from Stone Crabs Swim Team I understand that this release discharges Stone Crabs Swim Team from any liability or claim that I, my heirs, or any personal representatives may have against Stone Crabs Swim Team with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Stone Crabs Swim Team. This liability waiver and release extends to Stone Crabs Swim Team with all owners, partners, and employees.

Participant Name (Please Print)

Participant Date of Birth

Today's Date

Participant Signature

Today's Date

Parent/Legal Guardian of Participant Name (Please Print)

Relationship

Today's Date

Parent/Legal Guardian of Participant Signature

Today's Date