

## [PROPOSED] COVID-19 LIABILITY RELEASE WAIVER

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 via aerosol from close person-to-person proximity. 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.

The United Methodist Church, the Cameron United Methodist Church, Rev. Dr. Valerie L. Jackson, Lead Pastor, and Rev. Denise Bender, Associate Pastor (**jointly "UMC"**) have put in place process, protocols and preventative measures to reduce the spread of the COVID-19. However, UMC cannot guarantee that you will not become infected with COVID-19. Further, participating in activities with others in the Cameron United Methodist Church building ("**CUMC**") could increase your risk of contracting COVID-19.

I \_\_\_\_\_ acknowledge the foregoing and agree to the following:

**PRINT NAME**

Initials	Declaration
____	I am over 18 years old and I am in CUMC voluntarily to perform activities (e.g., performing music) in possible proximity to others who are not in my household.
____	I followed the posted CUMC protocols on arrival at CUMC.
____	Neither I nor any member(s) of my household have been diagnosed with COVID-19 within the past 30 days.
____	Neither I nor any member(s) of my household have traveled outside of Colorado, nor to any city in Colorado considered to be a "hot spot" for COVID-19, within the past 30 days.
____	I understand that COVID-19 Symptoms include, but are not limited to, fever, fatigue, dry cough, new loss of taste or smell, and/or difficulty breathing.
____	I have not experienced COVID-19 symptoms within the past 14 days from today.
____	If I contract COVID-19 or develop COVID-19 symptoms within 14 days from today, I agree to contact CUMC at 303-777-7638 or by email to <i>cameronumc@gmail.com</i> .
____	I am fully and personally responsible for my own safety and actions while and during my participation in activities and I recognize that I may be at risk of contracting COVID-19 due to the actions, omissions, or negligence of myself and others, including, but not limited to UMC clergy and staff as well as any visitors in the building.
____	I understand that UMC cannot be held liable for any exposure to the COVID-19 virus caused by misinformation on this form provided by each visitor to the building.

By placing my initials above and signing below, I confirm that I am in CUMC voluntarily and I release and agree to hold UMC harmless from, and waive on behalf of myself, my heirs, and any personal representatives, any and all liability for unintentional exposure or harm due to COVID-19, whether a COVID-19 infection occurs before, during, or after participation in any activity in CUMC.

This waiver will remain effective until laws and mandates relevant to COVID-19 are lifted.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Phone and/or email (required for contact tracing):** \_\_\_\_\_