

Assumption of Risk and Waiver of Liability Relating to
COVID-19 (Family, Parents, Children, or Volunteers)

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 health agencies recommend social distancing and have, in some locations, prohibited the congregation of groups of people.

___ **Holy Name of Jesus Faith Formation** ___ (NAME OF PARISH/MINISTRY) has put in place preventative measures to reduce the spread of COVID-19; however, we cannot guarantee that you (and/or your child(ren)) (specifically named herein below) will not become infected with COVID-19. Furthermore, participation or attendance at meetings, camps, retreats, events, activities, programs, functions, or gatherings of any kind sponsored by ___ **Holy Name of Jesus Faith Formation** ___ (NAME OF PARISH/MINISTRY) could increase your (and/or your child(ren)'s) risk of contracting COVID-19.

By signing this agreement, I _____ (Full Name) hereby acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I (and/or my child(ren)) may be exposed to or infected with COVID-19 by my participation or attendance at meetings, camps, retreats, events, activities, programs, functions, or gatherings of any kind, and that such exposure to COVID-19 may result in infection, illness, personal injury, permanent disability, and death. I understand that the risk of becoming exposed to or infected with COVID-19 may result from the actions, inactions, omissions, or negligence of myself, or others, including but not limited to, clergy, teachers, employees, staff, coaches, volunteers, and other participants, attendees, and/or their families.

I hereby voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any infection, illness, sickness, damage, loss, expense, and/or liability of any kind (including, but not limited to, personal injury, disability, and death) (hereinafter "Claims"), that I (and/or my child(ren)) may experience or incur in connection with participation or attendance at meetings, events, activities, programs, functions, or gatherings any kind sponsored by ___ **Holy Name of Jesus Faith Formation** ___ (NAME OF PARISH/MINISTRY).

On my behalf (and/or on behalf of my child(ren)), I hereby release, covenant not to sue, discharge, and hold harmless ___ **Holy Name of Jesus Faith Formation** ___ (NAME OF PARISH/MINISTRY), William A. Wack, as Bishop of the Diocese of Pensacola-Tallahassee, the Diocese of Pensacola-Tallahassee, and all of their current, former, and future representatives, agents, clergy, teachers, employees, staff, coaches, and volunteers (collectively, "the Diocese") of and from all Claims, including all liabilities, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this assumption of risk, waiver, and release includes any Claims based on the actions, inactions, omissions, or negligence of the Diocese, whether a COVID-19 infection occurs before, during, or after my participation or attendance at any meetings, events, activities, programs, functions, or gatherings of any kind sponsored by ___ **Holy Name of Jesus Faith Formation** ___ (NAME OF PARISH/MINISTRY).

This Assumption of Risk and Waiver of Liability Relating to COVID-19 is applicable to me and/or my child(ren) stated as follows: _____

(FULL NAME(S) AND DATE(S) OF BIRTH)

Signature of Parent/Guardian/Volunteer

(Date)

Print Name

September 2022