



NCCH Waiver of Liability and COVID-19 Form

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 be an airborne disease and spread by person to person contact. As a result federal, provincial and municipal governments and health agencies have prohibited congregation of large groups of people, and recommend both social distancing and wearing of non-hospital grade face masks when 2 meters (6 feet) separation is not able to be maintained (i.e. social distancing). Activities are said to be safer outside, when possible.

NCCH has put in place preventative measures to reduce the potential spread of COVID-19, however, NCCH **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. Further, by attending, volunteering and/or participating in/at NCCH events, training and programming of any kind your risk and/or that of your child(ren) **could increase** of contracting COVID-19.

Everyone has been informed of the dangers of COVID-19 and the best defense is to respect social distancing and when not able to stay 2 meters (6 feet) away from others to wear a mask.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and **voluntarily assume the risk** that my child(ren) and/or I may be exposed to or infected by COVID-19 by attending, volunteering or/and participating in NCCH events, training and programming of any kind 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 may result from the actions, omissions or negligence of myself or others, including, but not limited to, NCCH, its members/riders, and program participants, officers, directors, employees, independent contractors, agents, representatives, coaches and staff, volunteers and their families and those in the community in which I or they may come into contact (Those Released).

I acknowledge my responsibility to take measures to protect myself, my child(ren) and all others. I commit to respect the social distancing recommendations for both keeping a safe distance and wearing a mask, when appropriate.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) and/or myself including, but not limited to, personal injury, illness, permanent disability, death, property losses, damage, loss, claim, liability, or cost or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s and/or my attending, volunteering and/or participating at NCCH events, training and programming of any kind ("Claims").

On my behalf and/or on behalf of my child(ren), I hereby release, covenant not to sue, discharge, and/or hold harmless Those Released, as defined above, 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, omission, or negligence of Those Released whether a COVID-19 infection occurs before, during or after participation/attendance or volunteering in any NCCH event, training or program of any kind.

By initialling this box I acknowledge that I have read and fully understand this Waiver of Liability and I agree to accept the risk and that I am over 18 years old and have legal capacity to execute this document.

By initialling this box I acknowledge that I am the parent or legal guardian for and I have Waived Liability and accepted the Risk on this person's behalf and I am over 18 years old and have legal capacity to execute this document.

By initialling this box I acknowledge that I am a minor between the ages of 12 and 17 and that I have requested my parent or legal guardian to sign this document on my behalf. I have either read or had read to me this document and I fully understand that I am agreeing to participate/volunteer or train with NCCH and that by doing so I could become infected with COVID-19 or infect others and that I could get very ill and even die from Covid-19. I accept this Risk.

Date:	Name:	D.O.B.	Adult for Self
Date:	Name:	D.O.B.	Parent/ Guardian
Date:	Name:	D.O.B.	Minor 12-17

"Discipline will take you where desire cannot"