COVID-19 WAIVER

Full Name	Email Address		Gender
Street Address	City	Province/Region	Zipcode
Country	Date of Birth		

Assumption of the Risk and Waiver of Liability Relating to CoronavirusICOMD-19

The novel coronavirus, COMD-19, has been declared a worldwide pandemic by the World Health Organization. COMD-19 is extremely contagious and is believed to spread mainly from person-to-person contact. CrossFit 574 has put in place preventative measures to reduce the spread of COVID-19; however, CrossFit 574 cannot guarantee that you will not become infected with COVID-19. Further, participation could increase your risk of contracting COVID-19.

READ CAREFULLY BEFORE SIGNING - INITIAL EACH PARAGRAPH

Initial here:	

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by participation; 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 CrossFit 574 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, CrossFit 574's employees, volunteers, and program participants and their families.

Initial here:

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind,

that I may experience or incur in connection with my participation at CrossFit 574. On my behalf, I hereby release, covenant not to sue, discharge, and hold harmless CrossFit 574 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 CrossFit 574 its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation at CrossFit 574.

Initial here:

I represent that I have adequate insurance to cover any injury or illness I may suffer or cause while participating in this activity, or else I agree to bear the costs of such injury or illness myself. I further represent that I have no medical or physical condition which could interfere with my safety in this activity, or else I am willing to assume - and bear the costs of - all risks that may be created, directly or indirectly, by any such condition.

Initial here:

In the event that I file a lawsuit, I agree to do so in the state where CrossFit 574 is located, and I further agree that the substantive law of that state shall apply. I agree that if any portion of this agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

By signing this document, I agree that if I am exposed to or infected by COVID-19 during my participation in this activity, then I may be found by a court of law to have waived my right to maintain a lawsuit against the parties being released on the basis of any claim for negligence.

Initial here:
I have had sufficient time to read
understand that this activity might
were to choose not to sign this rel

I have had sufficient time to read this entire document and, should I choose to do so, consult with legal counsel prior to signing. Also, I understand that this activity might not be made available to me or that the cost to engage in this activity would be significantly greater if I were to choose not to sign this release, and agree that the opportunity to participate at the stated cost in return for the execution of this release is a reasonable bargain. I have read and understood this document and Lagree to be bound by its terms

Sign your name below:	Please read the <u>Electronic Records and Signature</u> Disclosure
☐ I agree to these terms.	
I agree that I will practice safe social distancing and clean hygiene dur PARENT OR GUARDIAN AE (Must be completed for partici In consideration of(enter minor's name on personal info) being harmless Releasees from any claims alleging negligence which are brought be minor **Parent or Guardian in the control of	DDITIONAL AGREEMENT ipants under the age of 18) g permitted to participate in this activity, I further agree to indemnify and hold by or on behalf of minor or are in anyway connected with such participation by or.
Initial here: If I have signed a separate general waiver of liability connected to my are wholly incorporated into this document and that the terms of this distribution. Initial here:	ocument are incorporated into the separate general waiver.
were to choose not to sign this release, and agree that the opportuni release is a reasonable bargain. I have read and understood this doct	