

Summer Soul Surf Camp

COVID-19 Liability Release Waiver for Participants

Due to the 2019-2020 outbreak of the novel Coronavirus (COVID-19), our business is taking extra precautions with the care of every participant to include health history review and enhanced sanitation/disinfecting procedures in compliance with CDC guidance.

Symptoms of COVID-19 include:

- Fever
- Fatigue
- Dry Cough
- Shortness of breath or difficulty breathing
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

Participant's Name _____

I, the above named **Participant** being above the age 18, or the **Parent** of the above named Participant who is under the age 18, and in consideration for attending, participating and viewing **Summer Soul Surf Camp**, hereby agree as follows:

(initial below)

_____ I understand the above symptoms and affirm that my child, as well as all household members, do not currently have, nor have experienced the symptoms listed above within the last 14 days.

_____ I affirm that my child, as well as all household members, have not been diagnosed with COVID-19 within the past 30 days.

_____ I affirm that my child, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the past 30 days.

_____ I affirm that my child, as well as all household members, have not traveled outside of the country or to any city considered to be a "hot spot" for COVID-19 infections within the past 30-days.

_____ I understand that Summer Soul Surf Camp cannot be held liable for any exposure to the COVID-19 virus caused by misinformation on this form or the health history provided by each participant.

Our business is following these enhanced procedures to prevent the spread of COVID-19:

- [see Summer Soul Surf Camp Reopening Plan]

By signing below, I agree to each statement above and release Summer Soul Surf Camp and affiliates including California State Parks and Volcom LLC from any and all liability for unintentional exposure or harm due to COVID-19.

Parent Signature: _____ Date: _____