

## Highlands Business Partnership PRIDE IN HIGHLANDS – EARTH DAY Waiver Form

Due to the Corona Virus Global Pandemic and its capacity to transmit from person-to-person through respiratory droplets, the government has set recommendations, guidelines, and some prohibitions which Highlands Business Partnership (the Organization) adheres to comply.

In consideration of my participation in the **PRIDE IN HIGHLANDS – EARTH DAY, APRIL 24, 2021**, the undersigned acknowledge and agree to the following:

- ☐ I have not experienced symptoms that of fever, fatigue, difficulty in breathing, or dry cough or exhibiting any other symptoms relating to COVID-19 or any communicable disease within the last 14 days.
- ☐ I have not, nor any member(s) of my household, traveled by sea or by air, internationally within the past 30 days.
- ☐ I did not, nor any member of my household, visit any area within the United States that was reported to be highly affected by COVID-19, in the last 30 days.
- ☐ I have not been, nor any member(s) of my household, diagnosed to be infected of COVID-19 virus within the last 30 days.
- ☐ I agree that I will wear a mask or face covering when not eating, drinking and social distancing as per NJ Executive Order 163.

Following the pronouncements above I hereby declare the following:

- ☐ I am fully and personally responsible for my own safety and actions while and during my participation and I recognize that I may be in any case be at risk of contracting COVID-19.
- ☐ With full knowledge of the risks involved, I hereby release, waive, discharge the Organization, its board, officers, independent contractors, affiliates, employees, representatives, successors, and assigns from any and all liabilities, claims, demands, actions, and causes of action whatsoever, directly or indirectly arising out of or related to any loss, damage, injury, or death, that may be sustained by me related to COVID-19 while participating in any activity while in, on, or around the premises or while using the facilities that may lead to unintentional exposure due to COVID-19.
- ☐ I agree to indemnify, defend, and hold harmless the Organization from and against any and all costs, expenses, damages, lawsuits, and/or liabilities or claims arising whether directly or indirectly from or related to any and all claims made by or against any of the released party due to injury, loss, or death from or related to COVID-19.

By signing below I acknowledge that I have read the foregoing Liability Release Waiver and understand its contents; that I am at least eighteen (18) years old and fully competent to give my consent; That I have been sufficiently informed of the risks involved and give my voluntary consent in signing it as my own free act and deed; that I give my voluntary consent in signing this Liability Release Waiver as my own free act and deed with full intention to be bound by the same, and free from any inducement or representation.

This waiver will remain effective until laws and mandates relevant to COVID-19 are lifted. (Use the right side below for multiple family members).

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**FULL NAME (please print)**

\_\_\_\_\_  
**FULL NAME (please print)**

\_\_\_\_\_  
**ADDRESS**

\_\_\_\_\_  
**ADDRESS**

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**CITY, STATE, ZIP**

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**CITY, STATE, ZIP**

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**PHONE:**

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**PHONE:**

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**EMAIL**

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