

COVID-19 CONSENT FORM

Assumption of Risk and Waiver, Relating to COVID-19

The coronavirus, COVID-19, is an extremely contagious virus which easily spreads from person to person. Federal, state, and local governments and health agencies strongly recommend or require social distancing and in some cases, limiting the total number of people that can be present within certain areas.

The Governor of Maryland, Larry Hogan, has begun relaxing the restrictions previously imposed to allow for certain activities to resume. Tollefson Swimming, LLC, has reviewed the phased relaxing of restrictions announced by Governor Hogan and has developed reopening procedures accordingly. It should be noted; however, that participation in swimming practices and activities could increase the risk of exposure to and contracting COVID-19.

Prior to participation in swimming practice and activities you will be requested to complete a Screening Questionnaire. It is vitally important that for your health, and the health of other swimmers, staff, and coaches, as well as the health of the family and friends with whom they come into contact with, that the Questionnaire be completed accurately and honestly.

I acknowledge that by participating in Tollefson Swimming practices and activities I, or my children, may be exposed to or infected by COVID-19 through no fault of Tollefson Swimming, LLC, and such exposure could result in illness, disability, or even death. I understand the risk imposed by the disease and potential infection and voluntarily agree to assume all risks, to waive any claims against Tollefson Swimming, LLC, and to assume personal responsibility for any illness, injury, disability of death to myself, or my children, and release and hold harmless Tollefson Swimming, LLC, its owners, managers, officers, employees, agents, and representatives, excepting any acts of gross negligence.

Signature

Date

Print Name

Phone

Signature of Parent or Guardian

Date