

Appendix B – COVID Waiver

Emergency Contact Form

Student Member's Name: _____

Chapter/School: _____

Parent Name: _____

Parent Cell #: _____



Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is reported to be extremely contagious. The state of medical knowledge is evolving, but the virus is believed to spread from person-to-person contact and/or by contact with contaminated surfaces and objects, and even possibly in the air. People reportedly can be infected and show no symptoms and therefore spread the disease. The exact methods of spread and contraction are unknown, and there is no known treatment, cure, or vaccine for COVID-19. Evidence has shown that COVID-19 can cause severe and potentially life-threatening illness and even death.

Georgia FCCLA cannot prevent chapter members from becoming exposed to, contracting, or spreading COVID-19 while participating in a **Georgia FCCLA sanctioned event** or being on the event premises. It is not possible to prevent the presence of the disease. Therefore, if your student chooses to participate in the Event or be on the event premises, he/she may be exposing himself/herself to and/or increasing their risk of contracting or spreading COVID-19.

ASSUMPTION OF RISK: I have read and understood the above warning concerning COVID-19. I hereby choose to accept the risk of contracting COVID-19 for my student member to participate in the Event and be on the event premises. These services are of such value to my student member that we accept the risk of being exposed to, contracting, and/or spreading COVID-19 in order to participate in the Event and be on the event premises in person.

WAIVER OF LAWSUIT/LIABILITY: I hereby forever release and waive my right to bring suit against Georgia Family, Career and Community Leaders of America, Inc. and its owners, officers, directors, managers, officials, trustees, agents, employees, or other representatives in connection with exposure, infection, and/or spread of COVID-19 related to participating in the Event and being on the event premises. I understand that this waiver means I give up my right to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims of negligence, and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

CHOICE OF LAW: I understand and agree that the law of the State of Georgia will apply to this contract.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE.

I am the parent or legal guardian of the minor named above (**Student Member**). I have the legal right to consent to and, by signing below, I hereby do consent to the terms and conditions of this Release.

Parent/Guardian Signature _____

Parent/Guardian Name (Printed) _____ Date _____