

**TOWN OF WESTPORT**  
**TOQUET HALL**  
**ASSUMPTION OF RISK & WAIVER OF LIABILITY**  
**RELATING TO CORONAVIRUS/COVID-19**

Name of Participant: \_\_\_\_\_

Name of Parent or Legal Guardian, if Participant is a minor: \_\_\_\_\_

I, the undersigned, expressly understand and agree with the following:

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Individuals and families should consult their healthcare provider to determine whether they have medical conditions that place them at risk.

Toquet Hall has put in place preventative measures to reduce the spread of COVID-19; however, we cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending Toquet Hall programs and/or activities and/or using Toquet Hall facilities could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending Toquet Hall programs and/or activities and/or using Toquet Hall facilities, 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 by attending Toquet Hall programs and/or activities and/or using Toquet Hall facilities may result from the actions, omissions, or negligence of myself and others, including, but not limited to, employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind (the "Claims"), that I or my child(ren) may experience or incur in connection with my or my child(ren)'s attendance at Toquet Hall programs and/or activities and/or using Toquet Hall facilities. On my behalf, and on behalf of my child(ren), I hereby release, covenant not to sue, discharge, and hold harmless the Town of Westport and 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 the Town of Westport and/or its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after attending Toquet Hall programs and/or activities and/or using Toquet Hall facilities.

I have read this Agreement of Risk and Waiver of Liability and fully understand its terms and voluntarily accept them and, if a parent or legal guardian, also voluntarily accept them on behalf of the minor participant. I certify that I am either the participant or the parent or legal guardian of the minor participant

\_\_\_\_\_  
Sign Here

Print Name: \_\_\_\_\_

Print Address: \_\_\_\_\_

Print Phone Number: \_\_\_\_\_

Date: \_\_\_\_\_