

FRIENDS of the KENNEDY MARTIN STELLE FARMSTEAD, INC.
dba FARMSTEAD ARTS

CORONAVIRUS/COVID-19 ASSUMPTION OF RISK AND WAIVER OF LIABILITY

According to the Center for Disease Control, Coronavirus/COVID-19 (“COVID 19”) is a highly contagious virus spread mainly from person to person contact.

Acknowledgment of Risk: I/we acknowledge that Farmstead Arts has taken preventive measures to prevent or reduce the spread of COVID-19. I/we also acknowledge that attending or participating in Farmstead Arts activities/programs increases my risk of exposure to COVID-19. I/we also acknowledge that Farmstead Arts cannot guarantee that I/we will not become exposed or infected with COVID-19 while Farmstead Arts activities/programs. I/we am/are voluntarily working participating in activities/programs provided by Farmstead Arts and acknowledge that I/we am/are assuming the risk of being exposed or infected with COVID 19 for any reason, including any actions, inactions, or negligence of Farmstead Arts trustees, officers, volunteers, paid teachers and/or paid contractors.

Waiver of Liability: I/we agree to hold Farmstead Arts harmless and forever release and waive my/our rights to bring suit against Farmstead Arts, its trustees, officers, volunteers, paid teachers and/or paid contractors in connection with any exposure, infection and or spread of COVID-19 while participating in Farmstead Arts activities/programs. I/we acknowledge that this means I/ we give up my/our rights to bring to any claims for personal injury, infection, death, or property loss whether known or unknown, foreseen or unforeseen.

I/WE HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS CORONAVIRUS/COVID-19 ASSUMPTION OF RISK AND WAIVER OF LIABILITY AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY/ OUR RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE.

I/we attest I/we am/are of legal age in the State of New Jersey and have expressed authority to represent myself/ourselves and all those I/we am/are registering with regard to this form.

Name (s): _____

Signature(s): _____

Email(s): _____

Phone(s): _____

Date: _____