Novel Coronavirus Acknowledgement & Assumption of Risk Annunciation Church – Ministry/Volunteers

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

I agree, represent and warrant that neither the undersigned, shall visit or utilize the facilities, programs, activities, or services of Annunciation within 14 days after (1) returning from outside the United States, (2) exposure to any person returning from outside the United States, or (3) exposure to any person who has a suspected or confirmed case of COVID-19.

I hereby agree, and represent that neither the undersigned shall visit or utilize the facilities, programs, activities, or services of Annunciation if he or she (1) experiences symptoms of COVID-19, including, without limitation, fever, cough or shortness of breath, or (2) has suspected or diagnosed/confirmed case of COVID-19. The undersigned agrees to notify Annunciation immediately if any of the foregoing access or use restrictions may apply.

Annunciation has put in place preventative measures to reduce the spread of COVID-19. I agree to comply with measures that Annunciation may require to best protect against the introduction of viruses. Annunciation cannot guarantee that myself or my child(ren) will not become infected with COVID-19. I understand and agree that taking part in activities could increase my risk or my 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 myself or my child(ren) may be exposed to.

Parent/Guardian Signature	Date:	
Parent/Guardian Name (printed)		
In case of emergency contact: Name:	Phone Number:	Relation: