

Assumption of Risk and Waiver of Liability Relating to COVID-19

The novel Coronavirus, COVID-19, is a worldwide pandemic as declared by the World Health Organization (WHO). COVID-19 is contagious and is believed to be spread mainly from person-to-person contact. In efforts to reduce the spread of the disease, state and local governments have put forth standards for gyms to abide by as they reopen for business. Balance 180 follows state and local regulations and CDC/WHO guidelines to keep our athletes and staff safe and reduce the spread of COVID-19. This includes wearing masks and/or social distancing, promoting and enforcing hand hygiene and frequent sanitation of high touch surfaces. Despite these measures, Balance 180 cannot guarantee that you or your child(ren) may not become exposed and/or infected with COVID-19 when attending activities at Balance 180.

ASSUMPTION OF RISK:

By signing this agreement, you acknowledge that you are aware of the contagious nature of COVID-19 and voluntarily assume the risk that your child(ren) and you may be exposed to or infected by COVID-19 by attending Balance 180 activities and that such exposure or infection may result in personal injury, illness, permanent disability, and death. You understand that the risk of becoming exposed to or infected by COVID-19 at Balance 180 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Balance 180 employees, team members, volunteers, and program participants and their families.

WAIVER OF LIABILITY:

By signing this agreement, you attest that you voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to your child(ren) or yourself (including, but not limited to personal injury, disability, and death), illness, damage, loss, claim, liability, or expense of any kind, that you or your child(ren) may experience or incur in connection with my child(ren)'s attendance at Balance 180 or participation in Balance 180 programming ("Claims").

On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless Balance 180, 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 Balance 180, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Balance 180 program.

Signature of Parent/Guardian	Date
Print Name of Parent/Guardian	Athlete 1's Name
	Athlete 2's Name

Athlete 3's Name