



Androscoggin Home Healthcare + Hospice

Camp Dragonfly 2021
COVID-19 Liability Waiver and Release of Claims

COVID-19 Safety Information:

While participating in the events held or sponsored by Androscoggin Home Healthcare + Hospice (Androscoggin) "social distancing" must be practiced and face coverings worn at all times to reduce the risks of exposure to COVID-19. Because COVID-19 is extremely contagious and is spread mainly from person-to-person contact Androscoggin has put in place preventative measures to reduce the spread of COVID-19. The undersigned acknowledges and agrees that Androscoggin may revise its procedures at any time based on updated recommended guidance and protocols issued by the CDC and further agrees to comply with Androscoggin's revised procedures provided prior to attending any in-person event. Despite these safety practices, Androscoggin cannot guarantee that its participants, volunteers, partners or others in attendance will not be subject to transmission of COVID-19.

In light of the ongoing spread of COVID-19, individuals who will fall within any of the categories below should not engage in Camp Dragonfly. By attending Camp Dragonfly, you certify that you do not fall into any of the following categories:

1. Individuals who currently or within the past 14 days have experienced any symptoms associated with COVID-19, which include fever, cough, shortness of breath among others; please see CDC website for complete list of symptoms. <https://www.cdc.gov/coronavirus/2019-ncov/your-health/about-covid-19.html>
2. Individuals who have traveled internationally at any point in the past 14 days. The CDC Travel Health Network is continuously updating the list and the undersigned agrees that they are aware of this list and the countries listed; or
3. Individuals who believe that they may have been exposed to a confirmed or suspected case of COVID-19 or have been recently diagnosed with COVID-19 and are not yet cleared as non-contagious by state or local health authorities or the healthcare team responsible for their treatment.

Assumption of the Risk: I acknowledge and understand the following.

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. While particular rules and personal discipline may reduce risk, the risk of serious illness and death from COVID-19 does exist. I acknowledge the health risks associated with this activity. I agree if I experience any signs or symptoms, I will immediately discontinue the activity and seek medical assistance. I DO HEREBY RELEASE AND FOREVER DISCHARGE THE RELEASED PARTIES AND ITS PARTNERS FROM CLAIM WHATSOEVER WHICH ARISES OR MAY HEREAFTER ARISE ON ACCOUNT OF ANY FIRSTAID, TREATMENT, OR SERVICE RENDERED IN CONNECTION WITH MY PARTICIPANTION IN THE ACTIVITY.
2. I knowingly and freely assume all such risks related to illness and infectious diseases, such as COVID-19 even if arising from the negligence or fault of the released parties; and
3. I hereby knowingly assume the risk of injury, harm or loss associated with the activity, including any injury, harm and loss caused by the negligence, fault or conduct of any kind on part of the released party and its partners.

Duty to Self-Monitor:

Participants and volunteers agree to self-monitor for signs and symptoms of COVID-19 (symptoms typically include fever, cough, shortness of breath) and contact Bereavement Coordinator Amy Dulac at 795-9468 or bereavement@androscoggin.org if she/he experiences symptoms of COVID-19 within 14 days of participating.