

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

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.

Yoyo's Gym LLC DBA Gym Integrity 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.

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 Gym Integrity 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 at Gym Integrity may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Gym 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, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at Gym Integrity or participation in Gym Integrity programming. On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge or lay blame to Gym Integrity, its employees, agents, and representatives should I or my child(ren) contract COVID-19. I agree to be forthright and true with Gym Integrity should I show symptoms of illness, test positive for COVID-19, come in contact with people or persons showing symptoms of illness, or come in contact with people or persons who have tested positive for COVID-19. Should I choose not to wear a mask, I will continue to follow all safety precautions, including but not limited to, frequent hand washing, maintaining a safe social distance of at least 6 feet and bringing my own towel. The wearing of a mask will still be required for Fascial Stretch Therapy or FST by client and therapist.

Signature of Parent/Guardian

Date

Print Name of Parent/Guardian

Name of Gym Participant(s)