



# Risk for COVID-19

Dear Valued Adventure Club Participant,

The health and safety of our participants, staff and vendors is our top priority. What is expected of attendees:

You are solely responsible for assessing and implementing the appropriate safety and security measures for yourself. Your participation in safe practices is required.

The World Health Organization, Center for Disease Control and the Minnesota Department of Health all have resources and guidelines available to understand the risks of attending events. Your understanding of this information provided by the above-mentioned agencies is your responsibility. We continue to follow the guidance and recommendations of the Minnesota Department of Health.

We require that attendees self-certify that they do not have symptoms, have not been diagnosed with or had direct contact with a known or suspected COVID-19 case in the past 14 days, and will comply with the event's safety policies and procedures including wearing face coverings if desired or mandated by the MN Department of Health and/or the State of Iowa and/or the State of Illinois, physical distancing, and other determined requirements. Violation of policies will cause removal from the event at your expense.

To ensure the safety of our staff and guests, we are asking you to assess any symptoms you may have ***on the day of the adventure***. You will be asked to fill out a form ***on the day of the trip*** to review each symptom listed below and answer "yes" or "no" if this is a symptom that you are experiencing and cannot attribute to another health condition. Regarding symptoms, the form on the day of the trip will read as follows:

Do you have:

Fever or feeling feverish?

Chills?

Shortness of breath?

A new sore throat?

New muscle aches?

New headache?

New loss of smell or taste?

If you answered "Yes" to any of the symptoms listed above, you will not be permitted to attend the adventure. My Credit Union Adventure Club will work to refund as much as possible of the adventure cost, **but cannot guarantee a refund -- even a partial refund**. I understand that I may not be able to get a refund on the day of the adventure should I experience any of the above symptoms that I cannot attribute to another health condition and not be able to participate in the adventure.

## COVID-19, ITS VARIANTS WAIVER:

By purchasing a ticket and/or attending an event, I automatically accept the Assumption of Risk and Waiver of Liability Relating to Coronavirus/COVID-19, its variants, and other communicable viruses or diseases.

Assumption of Risk and Waiver of Liability Relating to Coronavirus/COVID-19 the novel coronavirus, its variants, and other communicable viruses or diseases. COVID-19 and its variants are extremely dangerous and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal, state, and local health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. I understand and recognize that preventative measures have been put in place to reduce the spread of COVID-19 and its variants; however, I may become infected with COVID-19 or its variants. Further, attending adventures with MY Credit Union, could increase my risk of contracting COVID-19 and/or its variants. By paying for and by participating, I acknowledge the



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contagious nature of COVID-19 and its variants and voluntarily assume the risk of being exposed or infected by COVID-19 and/or its variants by attending adventure(s) and that such exposure or infection may result in personal injury, illness, permanent disability, and /or death. I understand that the risk of becoming exposed to or infected by COVID-19 or its variants on the adventure may result from the actions, omissions, or negligence of participants and other, including, but not limited to employees, volunteers, and program participants and their families. I voluntarily agree to assume all the foregoing risks and accept sole responsibility for any injury to myself including, but not limited to, personal injury, illness, permanent disability, and /or death, damage, loss, claim, liability, or expense of any kind, that I may experience or incur in connection with my or anyone I have legal responsibility for in connection with attendance and/or participation on this adventure. On my behalf and on behalf of anyone on this adventure for whom I am legally responsible for, I hereby release, covenant not to sue, discharge, and hold harmless MY Credit Union, 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 My Credit Union, its employees, agents, representatives, where a COVID-19 its variants, and other communicable viruses or diseases infection occurs before, during or after participation in this adventure or associated event program.

Participant's Printed Full Name: \_\_\_\_\_

Participant's Date of Birth: \_\_\_\_\_

Participant's Email Address: \_\_\_\_\_

Participant's Signature: \_\_\_\_\_

Date Signed: \_\_\_\_\_