

Assumption of 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-toperson contact. As a result, federal, state, and local governments and federal and state health agencies recommend physical distancing and have, in many locations, prohibited the congregation of groups and people.

The City of Tukwila ("City") has adopted preventative measures to reduce the spread of COVID-19; however, the City cannot guarantee that you or any other person, will not become infected with COVID-19. Further, attending City-sponsored activities or being at City parks or facilities could increase your risk

of contracting COVID-19. Carefully read the below "COVID-19 Assumption of Risk & Waiver of Liability" and "Mandatory Face Covering Policy" and add your initials in the boxes and sign below if you understand and agree with these terms.
COVID-19 Assumption of Risk & Waiver of Liability: I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk and accept full responsibility for any injury (including, but not limited to, illness, disability, and/or death) that my result from my mino child(ren) or I being exposed to or infected with COVID-19 by attending City of Tukwila Paractivities or programs or being at City parks or facilities. I voluntarily assume the risk and accept full responsibility for any personal injury, illness, temporary or permanent disability, death, damage, loss, claim, liability, or expense, of any kind and to any degree, that I or my minor child(ren) may experience or incur in connection with our participation in City of Tukwila activities, programs, or use of facilities. I hereby release, covenant not to sue, discharge, and hold harmless the City of Tukwila, its employees, agents, volunteers, and authorized persons and representatives, of and from all liabilities including claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I do hereby release the City of Tukwila and its employees, volunteers, or other representatives, and other program participants and their families, from any liability or claim based on the actions, omissions, or negligence of its staff or representatives, whether a COVID-19 infection occurs before, during, or after participation in any City of Tukwila programs.
By signing this agreement, I agree to adhere to the Governor's Phased Guidance for Healthy Guidance regarding COVID-19 for sporting, gathering, or entertainment events and activities. I agree to adhere to the Face Coverings Order issued by the Secretary of the Washington State Department of Health.
I have read, understand, and agree to the above statements. Please initial the boxes above and sign and date below.

Signature:	Date:
Your Printed Full Legal Name:	
The Printed Full Legal Name(s) of Your Minor C	hild(ren) (Use Back of Form, If Needed):