COVID-19 DISCLAIMER / WAIVER OF LIABILITY

Waiver of Liability, Release, Assumption of Risk & Indemnity Agreement Notice

This is a legally binding agreement. I,	, Parent/Guardian of
	, acknowledge
and many other public health authorities still reconstituted that the control of	-19 and that the Center for Disease Control and Prevention ("CDC") immend risk mitigating practices. I further acknowledge that Cheshire we measures to reduce the spread of the Coronavirus / COVID-19. We by those measures, neither the measures themselves nor even in environment that is entirely free of COVID-19 related risks. By the tion Bible School, you acknowledge and understand that your to physically interact with others. As such, despite reasonable action with others may pose some unavoidable risks to you, your ademic. With that, you further acknowledge and agree to the following:
liability, claims and demands of whatever kind or from your child's participation in activities associa	rever discharge and hold harmless CLC and its agents from any and all nature, either in law or in equity, which arise or may hereafter arise ted with CLC. You understand that this release discharges CLC from C with respect to COVID-19. This liability waiver and release extends to
unavoidable COVID-19 community spread. As such	at your child/ren's participation may expose him/her and others to the hound hereby expressly and specifically assume the risk of injury or all liability for injury, illness or other issue resulting from or any way
cough, shortness of breath or difficulty breathing throat, or new loss of taste or smell, have not tra- last 14 days, have not been exposed to someone have not been diagnosed with Coronavirus / COV	your child/ren are not experiencing any symptoms of illness such as fever, chills, repeated shaking with chills, muscle pain, headache, sore yeled internationally or to highly impacted area(s) within the USA the with a suspected and/or confirmed case of the Coronavirus / COVID-19, D-19 and not yet cleared as non-contagious by state or local public owing all CDC recommended guidelines as much as possible and
Your signature below indicates that you have read	d, understand and will abide by all of the above terms and conditions.
Your Name You	r Child/ren's Name(s)
Signature	Date of Signing