

Maryland-National Capital Park and Planning Commission

Prince George's County Department of Parks and Recreation Waiver & Consent Form

I understand that the novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization and the Centers for Disease Control and Prevention. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, the Maryland-National Capital Park and Planning Commission and Prince George's County Department of Parks and Recreation, has put in place preventative measures, including social distancing where possible, to reduce the spread of COVID-19; however, the Commission cannot guarantee you, your family, or other participants will not become infected with COVID-19 while visiting its facilities, using its pools, or participation in its programs.

Participation in activities and programs at Commission facilities and pools including, may not always allow for proper social distancing measures and practices. I acknowledge that participation in any activities offered by the Commission is purely voluntary, and neither I, nor my child, should participate in any activity or program beyond my, or their, physical or medical condition which makes them uncomfortable or which I, or they, consider unsafe.

By accepting below, I understand and agree that my and/or my child's participation in any Commission program, visit to its facilities, or use of its pools, carries inherent risks including the risk of serious injury or death. I acknowledge that any activity involving, but not limited to, water, height, motion, and rotation in a unique environment may be extremely hazardous.

I hereby represent that if the participant is a minor, I am his/her parent/legal guardian and am legally authorized to provide the releases, authorizations, and permissions stated herein and all the information provided is accurate and complete. I expressly represent that neither I, nor my child have exhibited any of the symptoms of COVID-19 within the last 14 days which include, but not be limited to: fever, chills, muscle aches, cough, fatigue, sore throat, difficulty breathing, a loss of taste or smell, or any other flu-like symptoms. I expressly represent that neither I nor my child have not been in close, prolonged contact with anyone who has exhibited these symptoms within the last 14 days. I further understand that should I or my child develop any of the above symptoms during the course of the program, or learn of our exposure to someone else with these symptoms, my and/or my child's participation in the program will be terminated immediately and will remain terminated for at least 14 days.

I hereby give permission for the participant to participate in the Maryland-National Capital Park and Planning Commission's program(s) including transportation in approved vehicles (Commission Vehicles, Board of Education School Buses, or Commercial Motor Coaches). I acknowledge that the Commission, Prince George's County Department of Parks and Recreation has a policy for conduct in its recreational programs and facilities and I hereby agree that the participant is bound and subject to said policies, including the disciplinary provisions.

I, individually, and on behalf of my child and any and all heirs and personal representatives, do hereby release and forever discharge, indemnify, defend, and hold harmless the Maryland-National Capital Park and Planning Commission, its Prince George's County Department of Parks and Recreation, servants, agents, commissioners, directors, officers, principals, attorneys, and successors from and against any and all costs, losses, expenses, damages, claims, lawsuits, judgments, and liabilities, including attorneys fees, incurred or arising from, either directly or indirectly, all claims for bodily/personal injury, death, loss of use, monetary loss, or any other injury from or related to the use of Commission facilities and/or pools, whether caused by the negligence of any of the individuals or entities above. I acknowledge and understand that this release is expressly intended to apply to all claims, obligations, debts, demands, actions, causes of action, suits, accounts, covenants, contracts, agreements, and damages whatsoever of every name and nature, both in law and equity, which I now have or in the future may have relating to, occurring during, or arising out of, any injury or illness sustained by me or my child as a result of my and/or his/her use of Commission facilities, pools, or participation in the program stated above.

THIS RELEASE OF LIABILITY CONTAINS A RELEASE OF KNOWN AND UNKNOWN CLAIMS BY YOU AND YOUR CHILD. BY ACCEPTING BELOW, YOU ACKNOWLEDGE THAT YOU HAVE READ AND UNDERSTOOD THIS RELEASE OF LIABILITY, AND KNOWINGLY AND VOLUNTARILY ACCEPT BELOW.

Swimmer's Name: _____ Team: _____

Address: _____

Phone: _____

Parent Signature: _____ Date _____

