

**U-Turn, Inc.**

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

The health and well-being of our staff and members remains our top priority. To minimize the risk of COVID-19 entering our environment and spreading amongst our community, we have implemented procedures and requirements for our facility, detailed here -

<http://www.u-turn.org/covid-19-updates.html> and here - <http://www.u-turn.org/odva-fall-league.html>

All participants and staff participating in athletic activities at U-Turn must agree to and abide by the following:

- Participants exhibiting symptoms of COVID-19 or who have been exposed to someone exhibiting symptoms or has tested positive for COVID-19 within the last 14 days may not enter the building
- Each participant, prior to activity and after activity has concluded, is required to wear a mask during the duration of their time in the facility.

By signing this agreement, I understand U-TURN cannot prevent infection of COVID-19. Further, participating in programs in the U-TURN facility could increase risk of contracting COVID-19. I voluntarily agree to the participation terms above and assume risk, including but not limited to exposure or infection may result in personal injury, illness, permanent disability, and/or death. I understand that any risk may result from the actions, omissions, or negligence of myself and others, including, but not limited to, U-Turn employees and contractors, volunteers, program participants, and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury including, but not limited to, personal injury, disability, death, illness, damage, loss, claim, liability, and/or expense, of any kind, that I may experience or incur in connection to the U-Turn facility and/or programming.

I hereby release the right to sue, enter lawsuit, discharge, and hold harmless U-Turn, 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 U-Turn its employees, agents, and representatives at any time.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Participant's Name

\_\_\_\_\_  
Participant's Signature (if 18 or older)

\_\_\_\_\_  
Parent/Legal Guardian Name  
(for participants under 18)

\_\_\_\_\_  
Signature of Parent/Legal Guardian: