

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 from person-to-person contact and/or by contact with contaminated surfaces and objects, and even possibly in the air. There is no known treatment, cure, or vaccine for COVID-19. Evidence has shown that COVID-19 can cause serious and potentially life-threatening illness and even death. As a result, federal, state, and local governments and health agencies recommend social distancing and other preventive practices.

Corona United Methodist Church (Corona UMC) has put in place preventive measures to reduce spread of COVID-19, but cannot prevent you and/or your children from becoming exposed to, contracting, or spreading COVID-19 while utilizing Corona UMC's services or premises. It is not possible, even with heightened cleaning procedures and social distancing, to prevent against the presence of the disease. Therefore, if you choose to utilize **Corona UMC's** services and/or enter onto Corona UMC's premises you may be exposing yourself (and your children) to and/or increasing your risk of contracting or spreading COVID-19.

ASSUMPTION OF RISK: I have read and understood the above warning concerning COVID-19. I voluntarily agree to accept any and all risk of being exposed to COVID-19 for myself and/or my children in order to utilize Corona UMC's services and enter [name of company]'s premises, and such exposure may result in personal injury, illness, permanent disability, and death. These services are of such value to me and/or to my children, that I accept the risk of being exposed to, contracting, and/or spreading COVID-19 in order to utilize Corona UMC's services and premises in person.

WAIVER OF LAWSUIT/LIABILITY: I hereby forever release and waive my right to bring suit against **Corona United Methodist Church** and **The California-Pacific Annual Conference of The United Methodist Church** and their successors, owners, officers, directors, trustees, agents, employees, volunteers or other representatives in connection with exposure, infection, and/or spread of **COVID-19 related to utilizing Corona UMC's services and premises.** I understand that this waiver means I give up my right to bring any claims including for personal injuries, disability, death, disease or property losses, or any other loss, including but not limited to claims of negligence and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

CHOICE OF LAW: I understand and agree that the law of the State of California will apply to this contract.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS RELEASE, AND ON MY BEHALF, AND ON BEHALF OF MY CHILD(REN), FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY/OUR RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE:

Signature: _____

Date: _____

Name (printed): _____

**SELF-ASSESSMENT QUESTIONNAIRE, GUIDANCE AND RISK MONITORING
FOR CORONA UMC MEMBERS, VOLUNTEERS, STAFF AND VISITORS**

Given national, regional and UMC guidelines and directives concerning the COVID-19 emergency, all members, volunteers, staff and visitors are required to complete this questionnaire prior to entry.

By answering a few questions, you will be able to assess your risk situation and take appropriate action. You cannot enter the campus without filling in this questionnaire and you must update it in case there are any changes to your personal situation as it pertains to this form.

The undersigned

First name: _____ Household Members: _____

Last name: _____ _____

Your email: _____ _____

Your phone: _____

declares that his/her/their answers to the following questions are true to the best of their knowledge:

1. Have you been in a country at risk or municipality in the so-called "red zone" in the last 14 days?

Yes ___ No ___

If you answered YES: If you have been in one of the countries at risk, you must stay home for 14 days and immediately contact the local health authority at _____. Corona UMC will communicate your name to the competent health authorities. If you have been in one of the provinces in a "red zone", you will not be allowed to enter the building. We will be in touch with you.

2. To your knowledge, have you been in contact with someone who was checked as a suspected case of, or was diagnosed with, COVID-19 virus?

Yes ___ No ___

If you answered YES: You must not come to Corona UMC. You must stay at home and contact the health authorities or your general practitioner immediately. We will be in touch with you.

3. Are you a high-risk individual who has not participated in health screening or an individual who refuses health screening, temperature check or social distancing measures?

Yes ___ No ___

If you answered YES: You must not enter the Corona UMC building. You may self-isolate and participate via outside seating. We recommend contacting the health authorities or your general practitioner immediately. We will be in touch with you.

I, the undersigned, declare that my answers to the above questions are true to the best of my knowledge, that I have read the above communications, and that I shall immediately inform Corona UMC in the event that any of my responses need to be changed.

I also declare that I am aware that if I am experiencing fever (above 99.5 F) and respiratory symptoms (cough, sore throat, cold), I must not come to the campus of Corona UMC. I must stay at home and contact my doctor and then Corona UMC by phone (951-737-5225) or email (CoronaUMC@gmail.com).

Signature: _____ Date: _____

Information on Data Protection: the data you provided here will only be used during this emergency situation.