

COVID-19 Liability Release Waiver

gardenclubjax.org 1005 Riverside Avenue Jacksonville, Florida 32204 904-355-4224 Scenic Jacksonville Great Cities Symposium October 6, 2021

Although the Garden Club of Jacksonville has implemented enhanced health and safety measures, an inherent risk of exposure to COVID-19 exists in any public place where people are present. COVID-19 can lead to severe illness, including death. According to the Centers for Disease Control and Prevention, senior citizens and guests with underlying medical conditions are especially vulnerable.

Contact	inform	ation
Contact	inform	ation

Name:	
Date:	Time:
Email address:	
Mobile number:	Other number:

Health questions

I have been fully vaccinated in 2021. Yes No

Now or in the past 72 hours, have you exhibited any of the following symptoms? (Check all that apply.)

Fever	Yes	No	Cough	Yes	No	Shortnes	ss of b	reath	Yes	No	Sore throat	Yes	No
In the p	ast 7 da	iys, hav	ve you trav	eled by	7 com	mercial pl	ane?	Yes	No				
In the la	ıst 14 da	ays, ha	ve you trav	veled o	utside	e the count	ry?	Yes	No	Where?			
In the p	ast 14 d	lays, ha	ave you tra	veled b	oy cru	ise ship?	Yes	No					

By signing this waiver, you are acknowledging:

- If you are sick or have recently been exposed to someone who is sick, you will not attend this event.
- If you are not fully vaccinated, we request that you wear a mask when indoors and remain six feet apart when interacting with others or any member of our staff.
- You voluntarily assume all risks related to exposure to COVID-19 and agree not to hold the Garden Club, or any of its affiliates, directors, officers, employees, agents, contractors, or volunteers liable for any illness or injury. Furthermore, you waive the right to file any claims against the Garden Club's general liability insurance policy as a result of bodily injury (including sickness, disease, death, and emotional distress) and claims of damage to property (contamination).
- If the Garden Club is contacted as part of contact tracing, your contact information will be shared with authorities as a measure to contain the spread of the COVID-19 virus.
- I have read the Liability Release Waiver and understand its contents.
- I am at least 18 years old and fully competent to give my consent.
- I have been sufficiently informed of the risks involved and give my voluntary consent in signing it as my own free act and deed with full intention to be bound by the same and free from any inducement or representation.
- This waiver will remain effective until laws and mandates relevant to COVID-19 are lifted.

Signature:

Date: