



## CAMP KEYSTONE CORONAVIRUS CONSENT FORM AND LIABILITY WAIVER

- I. The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and as a result, social distancing is recommended. Camp Keystone will always endeavor to reasonably and to the best of its ability follow state and local standards of conduct and has put in place reasonable preventative measures to reduce the spread of COVID-19 at its Summer Camp facility. Camp Keystone recognizes that social distancing is not always possible at summer camp but will encourage it whenever possible. However, even though such standards will be reasonably followed, and reasonable measures put into place, Camp Keystone cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, you understand and acknowledge that attending Camp Keystone could increase your risk and your child(ren)'s risk of contracting COVID-19.
  
- II. You further agree that for each day your child attends Camp Keystone, you certify the following:
  1. I take full responsibility for assessing my child for symptoms of COVID-19 each day before they are dropped off at camp.
  2. I will not allow my child to attend camp on any day in which they meet the CDC criteria for symptoms of COVID-19 as follows:
    - One or more of the following:
      - Cough
      - Chills
      - Sore Throat
      - Shortness of Breath
      - Muscle Pain
      - Loss of taste or smell
      - Difficulty breathing
      - Headache
      - Fever of 100.4 or more
  3. If my child has been diagnosed with COVID-19 or has symptoms of COVID-19 I will not allow my child to attend Camp Keystone until I talk to the Camp Director.
  4. My child has not come into contact with anyone diagnosed with COVID-19 for 14 days prior to the day my child is attending camp.
  5. My child has not traveled outside of the United States or come in contact with anyone who has traveled outside of the United States in the past 14 days.
  
- III. You further certify the following: I have reviewed the California Dept of Public Health "COVID-19 INDUSTRY GUIDANCE: Day Camps" provided to me by Camp Keystone, and have discussed all applicable requirements, practices, and procedures with my child, including but not limited to the requirements to wear a mask, wash hands, and maintain a distance of at least 6 feet from all other individuals to the greatest extent possible. I will immediately notify Program staff of any symptoms of the coronavirus or if a coronavirus infection is confirmed or presumed in my child, myself, or a household member. I agree that myself and my child will act in compliance with the most current guidelines.



- IV. By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending the day camp or similar activity and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the day camp or similar activity may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Camp Keystone, including employees and volunteers, and program participants and their families. I VOLUNTARILY AGREE TO ASSUME ALL OF THE FOREGOING RISKS AND ACCEPT SOLE RESPONSIBILITY FOR ANY INJURY TO MY CHILD(REN) OR MYSELF (INCLUDING, BUT NOT LIMITED TO, PERSONAL INJURY, DISABILITY, AND DEATH), ILLNESS, DAMAGE, LOSS, CLAIM, LIABILITY, OR EXPENSE, OF ANY KIND, THAT I OR MY CHILD(REN) MAY EXPERIENCE OR INCUR IN CONNECTION WITH MY CHILD(REN)'S ATTENDANCE AT CAMP KEYSTONE DAY CAMP OR PARTICIPATION IN CAMP KEYSTONE PROGRAMMING ("CLAIMS"). ON MY BEHALF, AND ON BEHALF OF MY CHILDREN, I HEREBY RELEASE, COVENANT NOT TO SUE, DISCHARGE, AND HOLD HARMLESS CAMP KEYSTONE (INCLUDING ITS SUCCESSORS, ASSIGNS, CURRENT AND FORMER OFFICERS, EMPLOYEES, VOLUNTEERS, SERVANTS, AGENTS, ATTORNEYS, INSURANCE CARRIERS AND SELF-INSURANCE POOLS) FROM ANY CLAIMS, AND WAIVE ANY AND ALL RIGHTS TO ASSERT SUCH CLAIMS, INCLUDING ANY AND ALL LIABILITIES, ACTIONS, DAMAGES, COSTS, OR EXPENSES OF ANY KIND OF EVERY NATURE ARISING OUT OF OR RELATING THERETO.
- V. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of Camp Keystone, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Camp Keystone day camp or similar program. I agree that presentation of this Release and Waiver constitutes a complete and affirmative defense to any action asserting any Claims and that any such action shall be dismissed with prejudice upon presentation of this Release and Waiver.

**I HAVE CAREFULLY READ THIS CONSENT FORM AND LIABILITY WAIVER, FULLY UNDERSTAND ALL OF ITS TERMS, UNDERSTAND THE RIGHTS THAT MY CHILD AND I FORFEIT BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

Camper's Full Name(s) \_\_\_\_\_

Parent Name (printed) \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

