

CORNELL COOPERATIVE EXTENSION - Volunteers and Program Participants

Assumption of the 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 mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people of more than the maximum number recommended by the New York State and Cornell Cooperative Extension as of the day of the program, activity, event or meeting.

Acknowledgement of Risk

I understand Cornell Cooperative Extension of Oswego County (“CCE”) has put in place preventive measures to reduce the spread of COVID-19; however, **CCE cannot guarantee** that I or my dependent(s) will not become infected with COVID-19. Furthermore, **entering the facilities, or participating in CCE programs could increase my risk of contracting COVID-19.**

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19.

By participating in **CCE** programs, events, or activities, exposure or infection involving the novel coronavirus may result in personal injury, illness, permanent disability, or death. I understand that the risk of becoming exposed to or infected by COVID-19 diseases may result from the actions, omissions, of myself and others, including, but not limited to, **CCE** employees, volunteers, other participants, visitors or vendors.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability or expense, of any kind, that I may experience or incur in connection with my entering **CCE** facility or participating in **CCE** programming (“Claims”). On my behalf, and on the behalf of heirs and estate, I hereby release, covenant not to sue, discharge, and hold harmless **CCE**, its directors, officers, employees, volunteers, 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 actions, or omissions of **CCE**, its directors, officers, employees, volunteers, agents, and representatives, whether a COVID-19 infection occurs before, during, or after my participation, or the participation of my dependent(s).

Additionally, as a volunteer, program participant or the guardian of a program participant under the age of 18, with my signature below, I acknowledge that I have reviewed the plan for Cornell Cooperative Extension of Oswego County. I will abide by the guidelines and continued updates as released by NYS Forward and the CDC.

Participant(s) Name: _____

Parent or Legal Guardian Name _____

Signature: _____

Date: _____
