



## VOLUNTEER FORM

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### **Assumption of Risks and Release of Liability Relating to Coronavirus 2019/COVID-19**

I, \_\_\_\_\_ (PLEASE PRINT FIRST & LAST NAME), acknowledge that on or about March 11, 2020, Coronavirus Disease 2019 ("COVID-19") was declared a pandemic by the World Health Organization. The Centers for Disease Control and Prevention ("CDC") has stated that **"the best way to prevent illness is to avoid being exposed to this virus."** Additional information on the CDC's guidelines related to COVID-19 may be found at: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>. I am aware of the contagious nature of COVID-19 and have voluntarily chosen to participate in special events and recreation programs operated by the Town of Lake Park ("TOLP"). I acknowledge that the TOLP will not provide masks and I will be solely responsible for providing my own mask if desired. I acknowledge that mask requirements may vary by each event and program. I acknowledge that the TOLP employees and volunteers come into contact with multiple individuals, and might become exposed to COVID-19. I also acknowledge that although the TOLP takes precautions to reduce the likelihood of transmission of COVID-19 by its employees and volunteers, the TOLP cannot guarantee that I will not become infected with COVID-19. I knowingly acknowledge that by participating in the TOLP special events and recreation programs, I am exposing myself (and other family members) to the risk of becoming infected with COVID-19, which may result in serious personal injury, illness, permanent disability, and death. I understand the risk of becoming exposed to or infected with COVID-19 may result from actions, negligence, and failures to act by myself and others, including, but not limited to, the TOLP employees, volunteers and other participants. I agree to assume all of the foregoing risks, and accept personal 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 or nature, that I may suffer arising out of or in connection with myself becoming exposed to or infected by COVID-19 before, during, and after my participation in the TOLP special events and recreation programs. On my own behalf, I hereby release, covenant not to sue, and forever discharge the TOLP, its employees, agents, and representatives, of and from all liabilities, claims, actions, damages, costs or expenses of any nature ("Claims") arising out of or in any way connected with myself becoming exposed to or infected by COVID-19. I understand that this release includes any Claims based on the negligence, action, or inaction of the TOLP or any of the TOLP employees, volunteers, agents, and representatives, and covers bodily injury (including death) due to COVID-19, whether a COVID-19 infection occurs before, during or after my participation in the TOLP special events and recreation programs.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Mail completed form to:  
Town of Lake Park  
Special Events Department  
535 Park Avenue  
Lake Park, FL 33403

[speialevents@lakeparkflorida.gov](mailto:speialevents@lakeparkflorida.gov)