## **Escapees Event Liability Waiver**

essential to building community as they provide us the	
days. I have had no symptoms of COVID-19, including	positive to COVID-19 or any other infectious disease in the past 5 cough, shortness of breath or difficulty breathing, chills, repeated loss of taste or smell, diarrhea, or feeling feverish or a measured 8 hours prior to attending the facility.
infection, personal injury or death. I further acknowledge	in inherent risks, dangers and hazards, which can result in serious ge, understand, appreciate, and agree that my participation in the m COVID-19. While protocols and personal discipline may reduce this not possible to fully mitigate.
negligence of the releasees or others and assume full reacknowledge that the risks inherent in participating in the to perform the safety precautions implemented by the E	and unknown risks of exposure to COVID-19, even arising from the sponsibility for my participation. I further recognize and the Event can be greatly reduced by, and therefore I expressly agree event staff, including, but not limited to: removing myself from the VID-19, or have had a recent known or suspected exposure to a e/local guidelines related to attending events.
COVID-19. My participation in this activity is purely with Event, I acknowledge that I understand its intent, an representatives, do hereby agree and absolve and hold hosts, and/or any other parties connected with the Even (the "Sponsors"), singularly/collectively, from and again	of the risks existing in the Event, including those related to obluntary, and I elect to participate despite the risks. By attending d for myself, my heirs, executors, administrators and armless Escapees, Inc., its affiliates and assigns, and the Event in any way together with their respective successor and assigns nst any blame and liability for any injury, harm, inconvenience, or r be connected in any way to my participation in the Event.
We appreciate you signing this release of liability. Together	ther we can work towards having a wonderful and safe event!
Please note: Waivers/releases of participants under	the age of 18 must be signed by a parent or legal guardian.
Signature	Date
Parent/Guardian	(Participants less than 18 yrs of age)
PARTICIP	ANT INFORMATION
Name:	Phone #:
SKP # Email:	
Emergency Contact:	Phone #: