

Assumption of the Risk and Waiver of Liability  
Relating to Coronavirus/COVID-19

Camp SMILE has put in place numerous preventative measures and enhanced cleaning protocols to reduce the likelihood of spreading COVID-19 at Camp SMILE. However, Camp SMILE cannot guarantee that you or your camper will not become infected with COVID-19. Further, attending a Camp SMILE summer camp session could increase your camper's risk of contracting COVID-19.

By signing the agreement, I acknowledge the contagious nature of COVID-19 and voluntarily agree to the participation terms and 16 items initialed by me presented in the Health Protocols listed above. I assume the risk that my camper, myself, and other family members may be exposed to or infected by COVID-19 by attending any camps and activities at Camp SMILE, and that such exposure or infection may result in personal injury, illness, permanent disability or death.

I understand that the risk of becoming exposed to or infected by COVID-19 at Camp SMILE may result from actions, omissions, or negligence of myself, my camper and others, including, but not limited to, Camp SMILE employees, volunteers, other campers and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injuries to my camper, myself, and other family members (including, but not limited to, personal injury, disability or death), illnesses, damages, losses, claims, liability, costs or expenses, of any kind (collectively, "Claims"), that I, my camper and our family may experience or incur in connection with my camper's attendance at Camp SMILE summer camp and programs.

On my behalf, and on behalf of my camper, I hereby release, covenant not to sue, discharge, and hold harmless Camp SMILE, its 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 the actions, omissions or negligence of Camp SMILE, its employees, volunteers, agents, and representatives, whether a COVID19 infection occurs before, during or after participation in a Camp SMILE summer camp program.

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Family Name (print legibly)

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Name of Parent/Guardian (print legibly)

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Signature of Parent/Guardian

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Date Signed