

## **Westchester Oratorio Society**

### **Waiver of Liability and Release Relating to Coronavirus/COVID-19**

The novel coronavirus, COVID-19 (which term includes any related virus, either known now or subsequently discovered), has been declared a worldwide pandemic by the World Health Organization and has been recognized as such by the Centers for Disease Control (CDC). COVID-19 is reported to be extremely contagious. The state of medical knowledge is evolving, but the virus is believed to spread from person to person through the air and, possibly, through contact with certain surfaces and objects or by other means. People reportedly can be infected and show no symptoms and therefore may spread the disease without their knowledge. The exact methods of spread and contraction are currently unknown. Evidence has shown that **COVID-19 can cause death or serious illness, and the long-term effects of infection are unknown.** Though evidence suggests that the COVID-19 vaccines currently authorized by the FDA significantly reduce the risk of contracting COVID-19, no vaccine is 100% effective.

Activities that may pose a high risk for COVID-19 include choral singing. Westchester Oratorio Society cannot guarantee that you or others you may come into contact with will not be exposed to, contract, or spread COVID-19 while participating in and utilizing our services. It is not possible for us to prevent the presence of the disease entirely. Therefore, if you choose to use our services and/or enter onto premises used by Westchester Oratorio Society, it is possible that you may be exposing yourself and/or increasing your risk of contracting or spreading COVID-19.

By entering into this waiver, you are acknowledging that you voluntarily seek participation with Westchester Oratorio Society and acknowledge that you may be increasing your risk of exposure to Coronavirus/COVID-19. You also acknowledge that you are and will comply with all applicable procedures to reduce the possibility of contracting or spreading COVID-19 while participating with Westchester Oratorio Society and using the facilities of Presbyterian Church of Mount Kisco, the Katonah Village Library or any other facilities used by Westchester Oratorio Society.

Given these facts, you confirm that:

- You agree to provide documentation of full vaccination against COVID-19 and understand and acknowledge that no vaccine is 100% effective and that neither the protection of current vaccines against known and potentially other variants nor the duration of immunity is fully known.
- You will not attend any rehearsal, concert, or other event organized by Westchester Oratorio Society if you are currently experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, muscle pain, headache, sore throat, or new loss of taste or smell.
- You will not attend any rehearsal, concert, or other event organized by Westchester Oratorio Society if you have traveled to a highly-impacted area in the last 14 days, unless you have complied with guidelines for re-entrance to the State of New York.
- You will not attend any rehearsal, concert, or other event organized by Westchester Oratorio Society if you believe you have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19, for a period of 14 days from the date of any such exposure.
- You will not attend any rehearsal, concert, or other event organized by Westchester Oratorio Society if you have been diagnosed with Coronavirus/COVID-19 and not yet cleared as noncontagious by state or local public health authorities.
- You will follow all CDC recommended guidelines as much as possible and limit your exposure to the Coronavirus/COVID-19 as much as possible, including through the wearing of a face mask.

**ASSUMPTION OF RISK: I hereby confirm that I have read and understood the above warning and acknowledgements concerning COVID-19.** As a result, and in order to participate with Westchester Oratorio Society and enter any premises utilized by them, I accept the risk of the possibility of contracting COVID-19 and the possibility that I may transmit it to others.

**WAIVER OF LAWSUIT/LIABILITY:** I hereby forever release and waive my right to bring suit against Westchester Oratorio Society and/or its officers, directors, managers, officials, trustees, agents, employees, or other representatives in connection with possible exposure, infection, and/or spread of COVID-19 related to participation with Westchester Oratorio Society and entering any premises utilized by them. In particular, I release and agree to hold the Westchester Oratorio Society and any of its representatives harmless from, and waive on behalf of myself, my heirs, and any personal representatives, any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that relate to COVID-19 and that may be caused by any act or failure to act (other than reckless or intentional acts or failure to act) by Westchester Oratorio Society and any of its representatives, or that may otherwise arise in connection with any participation with Westchester Oratorio Society. I understand that this release discharges Westchester Oratorio Society from any such liability or claim that I, my heirs, or any personal representatives may have against Westchester Oratorio Society and any of its representatives with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any participation with Westchester Oratorio Society, whether known or unknown, foreseen or unforeseen

**I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS WAIVER AND RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE. FURTHERMORE, I AGREE TO ADHERE TO ANY PREVENTATIVE MEASURES PUT IN PLACE BY WESTCHESTER ORATORIO SOCIETY TO REDUCE THE SPREAD OF COVID-19, INCLUDING, BUT NOT LIMITED TO, PROVIDING DOCUMENTATION OF FULL VACCINATION.**

Signature: \_\_\_\_\_

Name (printed): \_\_\_\_\_

Date: \_\_\_\_\_

Please attach a copy of your proof of vaccination card.