

Coronavirus Liability Release Form

Due to the outbreak of the novel Coronavirus, COVID-19, we are taking extra precautions with our summer camp, including: sanitation and disinfecting practices. Breakaway Ministries summer camp is located at El Matador Condos, 909 Santa Rosa Blvd, Ft. Walton, Beach, Florida. Please complete the following and sign below.

Symptoms of COVID-19 include:

- Fever
- Fatigue
- Dry cough
- Difficulty breathing
- Loss of taste and/or smell
- Body aches

I, _____ (students name) agree to the following:

- I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced the symptoms listed above within the last 14 days prior to day one of camp.
- I affirm that I, as well as all household members, have not been diagnosed with COVID19 within the last 30 days prior to day one of camp.
- I affirm that I, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the last 30 days prior to day one of camp.
- I affirm that I, as well as all household members, have not traveled outside of the country, or to any city outside of our own that is or has been considered a “hot spot” for COVID-19 infections within the last 30 days prior to day one of camp.
- I understand that Breakaway Ministries (including staff and volunteers) and El Matador cannot be held liable for any exposure to the virus or any other contagion caused by misinformation on this form and/or health history provided by each student.

By signing below, I agree to each above statement and release Breakaway Ministries, its leaders, its staff, its volunteers and the El Matador from any and all liability for the unintentional exposure or harm due to COVID-19.

Breakaway Ministries and all staff and volunteers agree that they abide by these same standards and affirm the same. We also affirm that we have improved and expanded our sanitation protocols to more thoroughly fight the spread of COVID-19 and other communicable conditions.

Signature of student _____ Date _____

Signature of parent _____ Date _____

Bring these release forms with you and turn them in at registration. DO NOT MAIL