

County of Fairfax, Virginia

To protect and enrich the quality of life for the people, neighborhoods, and diverse communities of Fairfax County

COVID Liability Waiver

_____, parent, legal guardian, or caretaker of ______ ١, _ acknowledge and understand that there are health risks and dangers associated with the transmission of communicable diseases, including but not limited to COVID-19. I recognize that there may be an increased risk that I, my child(ren), and/or the adult for whom I am a caretaker will be exposed to and contract such communicable diseases by virtue of their participation in Fairfax County Department of Neighborhood and Community Services (NCS) programs. In consideration of the services to be rendered in connection with NCS programs, I, for myself and the child(ren) or adult for whom I am parent, legal guardian, or caretaker fully assume all of the risks associated with the participation of myself, my child(ren), or adult in the NCS programs, including any and all risks of injury or illness. As such, I hereby agree to waive, release, defend, indemnify, and hold harmless Fairfax County, and its current and former employees, servants, agents, directors, Board members, departments, agencies, assigns and insurers, or all of them, from any and all liability, damages, and actions brought by myself, by or on behalf of my child(ren)s, and/or by or on behalf of the adult for whom I am a caretaker, in connection with their participation in NCS programs, including but not limited to damages related to exposure or transmission of COVID-19 in connection with their participation in NCS programs.

We ask that you help us protect the health of all children, families, and staff. Please remain home if you or your child is sick, or experiencing symptoms of COVID-19, or if anyone in your household has any signs or symptoms of COVID-19, or if you or your child have been in close contact with anyone who has been diagnosed with COVID-19 in last 14 days.

Signature

Date



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