

PLEASE READ

Per the church insurance company: to Ensure the SAFETY of the elderly, immunosuppressed, and very young, all adults entering the church building will be asked to sign the below waiver which will be kept on file at the church. Copies are in the church vestibule.

Dear Member:

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. As a result, federal, state, and local governments and agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. We are doing everything we can to be compliant with all regulations and ensure your safety. We have put in place preventative measures to reduce the spread of COVID-19, but we cannot guarantee that you or family members will not become infected with COVID-19.

By participating in programs, services, and activities of **The Church of Jesus Christ 600 East 36th Street, Charlotte NC 28205**, you agree to the following: Not to attend any service, practice or function if you are sick, have been around anyone sick, or waiting for results from being tested for COVID-19. This includes if you have any of the following symptoms of COVID-19. Fever, Fatigue, Cough, shortness of breath or loss of taste or smell.

Maintain social distancing inside the building. Face masks are recommended for everyone.

On behalf of yourself and your children, you hereby release, covenant not to sue, discharge, and hold harmless **The Church of Jesus Christ 600 East 36th Street Charlotte NC 28205**, its employees, agents, and representatives, of and from all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating to your participation in our programs, services or activities. You understand and agree that this release includes any claims based on the actions, omissions, or negligence of this organization, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any such program, service or activity.

Member Signature: _____

Printed Name: _____

Date: _____

Names of Minor Family Members (if any):

