**Kingsland Foundation, INC.**

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

**Kingsland Foundation** has put in place all precautions suggested for the protection of minors (please read our policy in our webpage: [Safe Environment | Tekesta](https://www.tekesta.org/safe-environment)) including the safe operation of all activities that take place in the facilities used by Tekesta Study Center, because of the appropriately staffed activities and well-trained volunteer staff. Additionally, we put in place preventative measures to avoid the spread of COVID-19 tailoring them to the specific activity (Edge Program, Summer Reading Camp, Frontier Club); however, Kingsland Foundation **cannot guarantee** that a participant and his family will not become infected with COVID-19.

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

Hence, by signing this agreement, I specifically acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child and his family may be exposed to or infected by COVID-19 by attending activities organized by Kingsland.

I as the legal parent voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child or his family (including, but not limited to, personal injury, disability, and even death), illness, damage, loss, claim, liability, or expense, of any kind, that my child or his family may experience or incur in connection with my child’s participation in Kingsland sponsored activities.

On my behalf, and on behalf of my family, I hereby release, covenant not to sue, discharge, and hold harmless Kingsland, its employees, agents, officer, directors, 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 whether a COVID-19 infection occurs before, during, or after participation in any Kingsland retreat, activity, workshop, or other program.

**Legal Parent (Print Name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

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