

GSGLA Assumption of Risk Waiver for In-Person Activities

This form is to be completed by a parent/guardian who has a Girl Scout participating in GSGLA activities (Troop/Group/Council) OR Adults who are participating in GSGLA activities including GSGLA adult volunteers (Troop/Service Unit). One permission form needs to be completed for each participant and will be used for all 2021/2022 events and activities. GSGLA requires a signed agreement for each minor and adult participant prior to participation with Girl Scouts.

Participant Information

Participant Name: First _____ Last _____

Parent/Guardian Name (if applicable):

First _____ Last _____

Adult Participant or Parent/Guardian Phone Number: _____

Participant level: Girl / Adult (please circle one) Troop number (5 digits): 22445

Assumption of Risk, Release and Waiver of Liability:

Please initial at the end of each section

Section 1

On behalf of myself and/or my children, I understand the below:

1. I understand Novel Coronavirus ("COVID-19") infections have been confirmed throughout the United States, including multiple cases in my area.
2. I understand COVID-19 is an extremely contagious virus that spreads easily, including through person-to-person contact.
3. I understand, as with any social activity, use of Girl Scouts of Greater Los Angeles (GSGLA to be known hence forth) facilities or services, or participation in GSGLA programs, may present the risk of contracting COVID-19. I further understand GSGLA takes safety and preventative precautions, and that GSGLA can in no way warrant that COVID-19 infection will not occur through use of such facilities or services or participation in GSGLA activities, inperson troop meetings and or programs.
4. I understand the known and potential dangers of participating in the programs and/or utilizing the facilities and services of GSGLA and acknowledge that my use thereof, and/or use by my participating children may, despite GSGLA's prudent and reasonable efforts to mitigate such dangers, result in exposure to COVID-19, which could result in quarantine requirements, serious illness, disability, and/or death.
5. I understand that due to the nature of the facilities, services, and programs offered by GSGLA, social distancing of 6 feet per person among children and or others, and compliance with guidance and recommendations of public health agencies, may not always be possible.
6. I understand that GSGLA has taken steps to implement certain guidance and recommendations issued by public health agencies for hindering the transmission of COVID-19, including, without limitation, the access/use restrictions set forth throughout the "GSGLA Assumption of Risk Waiver for In-Person Activities" form.
7. I understand that GSGLA may revise its procedures at any time based on updated recommended guidance and recommendations issued by public health agencies and that I and my participating children must comply with all GSGLA procedures prior to participating in, visiting, or utilizing the facilities, services, and/or the programs and/or attending in-person troop meetings or in-person service unit meetings of GSGLA.

Parent Initials _____

Section Two

On behalf of myself and/or my children, I agree to the below:

1. I agree to ensure that I and my participating children will comply with the most recent guidance and recommendations issued by the World Health Organization (WHO), the Centers for Disease Control and Prevention (CDC), state agency and local municipalities for slowing the transmission of COVID-19.

2. I agree that neither I nor my participating children shall visit or utilize the facilities, services, and/or programs of GSGLA or attend in-person GSGLA troop or service unit meetings within 14 days after (i) returning from highly impacted areas subject to a CDC Level 3 Travel Health Notice, (ii) exposure to any person returning from areas subject to a CDC Level 3 Travel Health Notice, (iii) exposure to any person who has a suspected or confirmed case of COVID-19, or (iv) exposure to any other risk identified by the most recent guidelines or recommendations or guidelines situation delineated by WHO, the CDC or my state public health agency or municipality.
3. I agree that neither I nor my participating children shall participate in, visit, or utilize the facilities, services, and/or programs of GSGLA if I, he, or she (i) experience(s) symptoms of COVID-19, including, without limitation, fever, cough, loss of sense of taste or smell, or shortness of breath, or (ii) has a suspected or diagnosed/confirmed case of COVID-19.
4. I agree to notify GSGLA immediately if I believe that any of the foregoing access/use restrictions may apply.

Parent Initials _____

Section Three

On behalf of myself and/or my children, I covenant to the below:

1. I covenant I, my heirs, assignees, distributees, guardians, next of kin, spouse and legal representatives will not make a claim against, sue, or attach any property of any releasee in connection with any matters covered by this release.
2. I covenant "not to sue" is intended to be as broad and inclusive as is permitted by law, and that if any portion thereof is held invalid, the balance shall, notwithstanding, continue in full legal force and effect.
3. I covenant, to the maximum extent permitted by applicable law, not to elect a trial by jury with respect to any matters covered by this release that may be triable of right by a jury, and (b) waive any right to trial by jury with respect to such matters to the extent that any such right exists now or in the future. This waiver of right to trial by jury is given knowingly and voluntarily. If governing law does not allow the waiver included in this paragraph, then I agree that this paragraph shall be severable from this Agreement.

Parent Initials _____

Section Four

On behalf of myself and/or my children, I hereby irrevocably and unconditionally release, waive, and discharge the below:

Girl Scouts of Greater Los Angeles and any of its affiliates, Girl Scouts of the USA and any of its affiliates, any other Girl Scout council, and any of their respective directors, officers, employees, volunteers, and agents (collectively, the "Releasees"), from any and all actions, claims and demands that I, my assignees, heirs, distributees, guardians, next of kin, spouse and/or legal representatives now have or may have in the future, whether known or unknown, foreseen or unforeseen, for injury, death or property damage and expenses of any nature whatsoever, related to (i) my participation or my children's participation in the programs or travel related thereto, (ii) the negligence or other acts, whether directly connected to these activities or not, and however caused, by any Releasee, or (iii) the condition of the premises.

Parent Initials _____

Signatures

By signing below, I acknowledge and understand the following:

I HAVE CAREFULLY READ AND VOLUNTARILY SIGN THIS ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY RELATING TO CORONAVIRUS/COVID-19 AND FURTHER AGREE THAT NO ORAL REPRESENTATIONS, STATEMENTS, OR INDUCEMENT APART FROM THE FOREGOING WRITTEN AGREEMENT HAVE BEEN MADE.

THIS DOCUMENT IS A PROMISE NOT TO SUE AND A RELEASE OF ALL CLAIMS. I AM AWARE THAT BY SIGNING THIS AGREEMENT, I AM GIVING UP VALUABLE LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES FROM GSGLA IN CASE OF ILLNESS, INJURY, DEATH OR PROPERTY LOSS OR DAMAGE, INCLUDING, FOR THE AVOIDANCE OF DOUBT AND WITHOUT LIMITATION, EXPOSURE TO COVID19 AT ANY GSGLA FACILITY OR DURING PARTICIPATION IN ANY PROGRAM OR ACTIVITY OR TRAVEL RELATED THERETO AND ANY ILLNESS, INJURY OR DEATH RESULTING THEREFROM.

Signature: _____

Date: _____

By signing in the box below, I acknowledge and understand the following:

I REPRESENT THAT I AM THE PARENT OR LEGAL GUARDIAN OF THE PARTICIPATING MINOR CHILD(REN). I ALSO UNDERSTAND THAT THIS AGREEMENT IS MADE ON BEHALF OF MY PARTICIPATING MINOR CHILD(REN) AND/OR LEGAL WARDS, AND I REPRESENT AND WARRANT TO GSGLA THAT I HAVE FULL AUTHORITY TO SIGN THIS AGREEMENT ON BEHALF OF SUCH MINOR(S).

Signature: _____

Date: _____