

Valley Contra Dance Society Covid Waiver

Participation Agreement, Waiver, Agreement Not to Sue, Assumption of Risk
& Release of Liability for Access to the
Valley Contra Dance at West Side Moravian Church

In consideration of being allowed to participate in Valley Contra Dance Society (VCDS) and related events and activities, the undersigned acknowledges, appreciates, and agrees in the existence of COVID-19 and risk of serious illness or death and the fact that it is spread through person-to-person contact.

VCDS will provide hand sanitizer and encourage good hand hygiene. VCDS will also follow CDC, state of Pennsylvania Health Department, and City of Bethlehem Health Department guidelines. As of this date (___ / ___ / _____) masks are recommended for vaccinated people while indoors.

I acknowledge the risk and voluntarily assume that risk. I also agree not to sue VCDS or West Side Moravian Church if I am to contract Covid-19.

I agree that I will **NOT** access or use the facilities, **NOR** participate in VCDS programs now or in the future if I:

1. Have been diagnosed (tested positive) with COVID-19 until such time as I am medically cleared to be in contact with others;
2. Have a fever, respiratory congestion, cough, or other symptoms of COVID-19 or a test pending for COVID-19;
3. Am under quarantine directed by a health care provider due to COVID-19 concerns; or
4. Have had contact with someone diagnosed with COVID-19 within the past 14 days until I am medically cleared to be in contact with others.

I hereby certify that I have read this document and I understand its content.

Signature: _____

Print Name: _____

City: _____

Date: _____

Email: _____

Phone #: _____