



## CORONAVIRUS LIABILITY

Seva Bodywork, LLC is committed to following CDC guidelines for sanitation and disinfection of common areas. Seva also takes additional time with client interviews and health history reviews to help minimize Covid-19 exposure to all clients. By signing below, you indicate that you have read, understand, and answered honestly.

**Symptoms of COVID-19 include:**

- Fever
- Confusion
- Chills
- Fatigue
- Dry cough
- Headache
- Difficulty breathing
- Loss of taste/smell
- Nausea/vomiting
- Congestion/runny nose
- *Unusual aches/pains*

I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced these symptoms within the last 14 days. *I further affirm I do not have symptoms of a respiratory infection.*

I affirm that neither I, nor any members of my household, have been diagnosed with COVID-19 *or received positive (+) test results* within the last 30 days.

I affirm that I, as well as all members of my household, have not knowingly been exposed to anyone diagnosed with COVID-19 within the last 30 days.

I understand this business and my massage therapist cannot be held liable for exposure to the virus or any other contagion due to misinformation on this form, or the health history form completed by each client.

My signature below affirms that I agree to each statement above and release the massage therapist, and Seva Bodywork, LLC from any and all liability for the unintentional exposure or harm due to COVID-19.

All employees of Seva Bodywork, LLC, agree to and abide by these same standards.

CLIENT SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

PRINTED NAME: \_\_\_\_\_

MESSAGE. TAILORED AROUND **YOUR** NEEDS.