

## **COVID-19 Liability Release Form**

Thank you for choosing to receive a service at Liz Kidder Studio, despite the 2019-2020 outbreak of Coronavirus/COVID-19. We are taking extra precautions with the intake of each client, health review, as well as sanitation and disinfecting practices to more thoroughly fight the spread of COVID-19 and other communicable diseases.

I, agree to the following:	
☐ I understand the symptoms of Covid-19 (fever, fatigue, dry cough, difficulty breathin and affirm that I, as well as any/all household members, do not currently have, nor have experienced the symptoms listed within the last 14 days.	_
$\ \square$ I affirm that I, as well as any/all household members, have not been diagnosed wit COVID-19 within the last 30 days.	th
☐ I affirm that I, as well as any/all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the last 30 days.	
☐ I affirm that I, as well as any/all household members, have not traveled outside the US, or to any city outside of my own that is or has been considered a "hot spot" for COVID-19 infections within the last 30 days.	<b>)</b>
☐ I understand that Liz Kidder Studio and its employees cannot be held liable for any exposure to the virus or any other contagion caused by misinformation on this form o the health history provided by each client.	•
By signing below, I agree to each above statement and release Liz Kidder Studio and my stylist(s) from any and all liability for the unintentional exposure or harm due to COVID-19. Liz Kidder Studio and all employees agree that they abide by these same standards and affirm the same.	
Full Name (Print):	
Phone Number:	
E-mail:	
Signature: Date:	