

LOUDOUN FAIRFAX HUNT, INC.
COMMUNICABLE DISEASE
RELEASE OF LIABILITY & ASSUMPTION OF RISK AGREEMENT

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, Federal, State and Local Governments and Federal and State Health Agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. Loudoun Fairfax Hunt, Inc., (LFH) has put into place preventative measures to reduce the spread of COVID-19; however, LFH cannot guarantee that you will not become infected with COVID-19.

In consideration of being allowed to participate in any way in LFH programs, related events, and activities, I the undersigned, acknowledge, appreciate and agree that: I am aware there are risks to me of direct or indirect exposure to communicable diseases, including, but not limited to, the virus "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)", which is responsible for Coronavirus Disease (COVID-19) and/or any mutation or variation thereof.

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS, LOUDOUN FAIRFAX HUNT, INC., its officers, officials, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct any events (RELEASEES), from any and all claims, demands, losses, and liability arising out of or related to any ILLNESS, INJURY, DISABILITY OR DEATH I may suffer, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Participant Signature: _____

Date: _____

FOR PARENTS/GUARDIANS OF PARTICPANT(S) OF MINOR AGE (UNDER AGE 18 AT TIME OF REGISTRATION).

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releasees, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasees from any and all liability incidents to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Minor's Name: _____

Guardian Signature: _____

Date: _____