CEDAR LANE FARM COVID-19 QUESTIONNAIRE & ACKNOWLEDGEMENT

PLEASE COMPLETE AND RETURN PRIOR TO ENTRY

IF THE ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS 'YES', YOU ARE RESPECTFULLY ASKED NOT TO ENTER THE PROPERTIES OR FACILITIES OF CEDAR LANE FARM, FLINT HILL PRESERVE AND/OR THEIR AFFILIATES

1. Within the last 14-days, have you experienced a new cough or sore throat that you cannot attribute to another health condition?

2. Within the last 14-days, have you experienced new shortness of breath that you cannot attribute to another health condition?

3. Within the last 14-days, have you experienced new muscle	e aches that you cannot attribute to another health
condition or a specific activity such as physical exercise?	🗆 YES 🛛 NO

4. Within the last 14-days, have you had a temperature at or above 100.4° or the sense of having a fever? □ YES □ NO

5. Within the last 14-days, have you attended any gathering or had close contact (defined as within 6 feet for more than 10 consecutive minutes), without the use of appropriate PPE, with someone who is currently sick with suspected or confirmed COVID-19?

6. Within the last 14-days, have you or a member of your household traveled to or from any state reporting an increasing rate of COVID-19 as identified in the New Jersey 14-day quarantine travel advisory list?

□ YES □ NO

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by attending an event on the premises of Cedar Lane Farm ("CLF") and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at CLF's properties may result from the actions, omissions, or negligence of myself and others, including, but not limited to, CLF employees, event participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my myself or my children (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with attendance at any CLF event ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless CLF, Flint Hill Preserve, Inc. ("FHP") and their respective affiliates, owners, employees, agents, and representatives (collectively, the "Released Parties"), of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of each of the Released Parties, whether a COVID-19 infection occurs before, during, or after participation in any event at CLF facilities.

Signature

Printed Name

Date of Activity

Phone

E-mail (please print legibly)