

COVID-19 Waiver

I attest that I have **NOT** had any of these COVID-19 symptoms listed from the CDC, or been exposed to someone who has, or been exposed to someone who has tested positive for COVID-19, since **October 9, 2020 (14 days before ride weekend)**. These symptoms include but are not limited to those listed below.

I further attest that I am not under an order of quarantine or isolation and am not awaiting test results for COVID-19.

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting

I acknowledge that the US Center for Disease Control (CDC) has published guidelines concerning COVID-19 and its potential mutations and side effects (COVID-19 risks) (including severe illness, death, and/or spread of COVID-19 risks of infection to my family and other people with whom I may come in contact) recommending, among other things, that anyone but especially people with compromised immune systems or other health issues, and those over the age of 60 should continue to shelter in place and not attend public events where large amounts of people from lots of area gather, like sporting events including bicycle rides.

In my sole discretion and full awareness of the risk I am taking by not following the CDC's guidelines/recommendations including stay at home/shelter in place restrictions, I understand that I am potentially increasing the risk of exposure and infection of COVID-19 (including severe illness, death, and/or the spread of COVID-19 risk of infection to my family and other people with whom I come in contact). I hereby acknowledge, accept, and assume all risk of such COVID-19 risks for myself and my family upon attending the Gorilla Century; and that the Gorilla Century, Tailwind Cyclists, Inc., its officers, owners, volunteers, sponsors, facility hosts, vendors, contract staff, agents, employees, shall not be liable for any damage whatsoever arising from any COVID-19 risks (including personal injury, illness, death, or any injury arising directly or indirectly from COVID-19 risks).

I understand that I assume full responsibility for all such COVID-19 risks and on behalf of myself and my family hereby fully and forever release discharge and hold harmless and indemnify the Gorilla Century ride, Tailwind Cyclists, Inc., all associated officers, owners, volunteers, sponsors, facility hosts, vendors, contract staff, agents, employees, from any claims, demands, damages or rights of action, present, or future resulting from my participation in the Gorilla Century.

I understand the Crawford County Department of Health requires a face mask, covering nose and mouth, at all times when indoors and in large groups or when unable to maintain 6 feet of social distance except when riding. I agree to maintain 6 feet of social distance when not riding and to wear a mask as required by health department order.

Participant Name: _____

Participant Signature: _____ Date: _____

If participant is a minor a parent or legal guardian must sign below.

I am the parent or legal guardian of the minor named above and agree to the terms of this waiver.

Parent/Guardian name _____

Parent/Guardian signature: _____ Date: _____