



MASTER CHOA KOK SUI

**PRANIC HEALING**

HEALTH THROUGH ENERGY

## **COVID-19 LIABILITY RELEASE WAIVER**

I acknowledge that COVID-19 restrictions have been lifted in different states and local areas and New York State's health guidance and industry specific guidelines have been released.

I acknowledge that the contagious nature of the Coronavirus/COVID-19 and that the CDC and other publichealth authorities still recommend facial coverings, practicing social distancing, and hand washing. I further acknowledge that The Center for Pranic Healing has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19.

I further acknowledge that The Center for Pranic Healing cannot guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, staff of The Center for Pranic Healing, and other participants and their families.

I voluntarily seek services provided by The Center for Pranic Healing and acknowledge that I must comply with all set procedures and guidelines which were implemented for safety of the participants and to reduce the spread of COVID-19. I attest that:

\* I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, headache, or new loss of taste or smell.

\* I have not been recently exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.

\* I have not been diagnosed with Coronavirus/Covid-19 recently and not yet cleared as non-contagious by stateor local public health authorities.

I hereby release and agree to hold The Center for Pranic Healing harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of The Center for Pranic Healing, or that may otherwise arise in any way in connection with any services received from The Center for Pranic Healing. I understand that this release discharges The Center for Pranic Healing from any liability or claim that I, my heirs, or any personal representatives may have against The Center for Pranic Healing with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from The Center for Pranic Healing. This liability waiver and release extends to The Center for Pranic Healing together with all owners, partners, and employees.

NAME (PRINT): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

<sup>1</sup> Covid-19 Waiver Form, 7/30/20, Rev 9/30/20. 07/07/21