



**COVID-19 ADDENDUM**  
**CITY REGULATIONS FOR USE OF CITY FACILITIES**  
**ASSUMPTION OF THE RISK AND WAIVER OF LIABILITY**

I. The following rules are added to the General Rules Of Use For The Youth And Family Services Building – Recreation Side, located at 4912 Nantucket Road, College Park, MD 20740

**OUTDOORS:**

- 6’ social distancing applies
- No masks required
- Number of persons: Not Available – no outdoor permitting.

**INDOORS:**

- 50% capacity. The maximum number of persons allowed in this facility is 25.
- 6’ social distancing applies
- Masks required

**II. ASSUMPTION OF THE RISK AND WAIVER OF LIABILITY**

COVID-19, which has been declared a worldwide pandemic by the World Health Organization, is a highly contagious virus, and is believed to be spread mainly from person-to-person contact. As a result, federal, state and local governments and health agencies have recommended social distancing, the wearing of facemasks, and have in many places prohibited or limited the congregation of groups of people.

I acknowledge that the City cannot guarantee that I or my child(ren) will not be exposed to or become infected with COVID-19 while attending activities at City facilities or at City-sponsored events. Attendance at or participation in activities at City facilities or at City-sponsored events could increase my risk and/or my child(ren)’s risk of contracting COVID-19, and potentially spreading the disease to other individuals.

By signing this agreement, I acknowledge the highly contagious nature of COVID-19, and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 while attending activities at City facilities, or at City-sponsored events, and that such exposure or infection may result in permanent injury, illness, permanent disability, and death. I understand and accept that the risk of becoming exposed to or infected by COVID-19 at City facilities or at City-sponsored events may result from the actions, omissions, or negligence of myself and

others, including, but not limited to, City employees, elected and appointed officials, volunteers, agents, and activity or event participants and their families.

I voluntarily agree to assume all of the foregoing risks, and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, permanent injury, illness, permanent disability, and death), as well as for any damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at City facilities or at City-sponsored events ("Claims"). I voluntarily agree on behalf of the organization, if applicable, to assume all of the foregoing risks, and accept sole responsibility for any Claims by any participant. On my behalf, and on behalf of my child(ren), and if applicable on behalf of the organization, I hereby release, covenant not to sue, discharge, and hold harmless the City, its employees, elected and appointed officials, volunteers, agents and representatives, 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 the City, its employees, elected and appointed officials, volunteers, agents, and representatives, whether a COVID-19 infection occurs before, during or after participation in activities at a City facility or a City-sponsored event.

I also understand and agree that the law of the State of Maryland will apply to this waiver.

**I have carefully read and fully understand all provisions of the rules of use and this waiver, and freely and knowingly assume the risk and waive my rights and those of my children, and/or organization, concerning liability as described above:**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name (Printed): \_\_\_\_\_

Organization Represented: \_\_\_\_\_

I am the parent or legal guardian of \_\_\_\_\_,  
and I have the legal right to consent to and, by signing below, I hereby do consent to the terms and conditions of this Waiver.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name (Printed): \_\_\_\_\_