

Spectrum Choral Academy
Communicable Disease Release of Liability and Assumption of Risk Agreement

In consideration of being allowed to participate in any way in singing and music related events and activities hosted by Stephanie Charbonneau & Donald Stojack / Exceptional Choral Events / Spectrum Choral Academy / Northwest Choir Camps / Northwest Choir Resources / Youth Choir Festival NW, I, the undersigned participant, parent, or legal guardian, acknowledge, appreciate, and agree that:

By participating in above mentioned and related events and activities, there are certain risks to me arising from or related to possible 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 (also known as COVID-19) and/or any mutation or variation thereof (collectively referred to as "communicable diseases"). I am fully aware of the hazards associated with such communicable diseases and knowingly and voluntarily assume full responsibility for any and all risk of personal injury or other loss that I may sustain in connection with such communicable diseases.

I, for myself or for my minor child(ren) or ward(s), and on behalf of my/our heirs, assigns, beneficiaries, executors, administrators, personal representative, and next of kin, HEREBY EXPRESSLY RELEASE, HOLD HARMLESS, AND FOREVER DISCHARGE STEPHANIE CHARBONNEAU & DONALD STOJACK, EXCEPTIONAL CHORAL EVENTS, SPECTRUM CHORAL ACADEMY, NORTHWEST CHOIR CAMPS, NORTHWEST CHOIR RESOURCES, YOUTH CHOIR FESTIVAL NW, and their officers, officials, agents, representatives, employees, other participants, sponsors, advertisers, and if applicable, owners and lessors of premises upon which related events and activities take place (the "Released Parties"), from any and all claims, demands, suits, causes of action, losses, and liability of any kind whatsoever, whether in law or equity, arising out of or related to any ILLNESS, INJURY, DISABILITY, DEATH OR OTHER DAMAGES incurred due to or in connection with any communicable diseases, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASED PARTIES OR OTHERWISE, to the fullest extent permitted by law.

I understand that not everyone will be wearing a facial covering during events including, but not limited to, participants, instructors, and observers. I accept full risk by signing this waiver and continuing to participate in choral singing and related activities.

I will not attend a rehearsal or performance while ill. I will refer to Washington State guidelines listed on the government website for additional information and updated guidelines.

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's Name (PRINT)

Date of Birth

Participant's Signature (if 18-years-old or older)

Date Signed

FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE (UNDER AGE 18 AT TIME OF REGISTRATION)

I certify that I am the legal parent/guardian with responsibility for this participant, and that I have read the foregoing Agreement and do consent and agree to his/her release of all the Released Parties as provided above. I further agree that, for myself, my heirs, assigns, beneficiaries, executors, administrators, personal representatives, and next of kin, I expressly release and agree to indemnify and hold harmless the Released Parties from any and all liability incident to the above Participants and myself as an observer at rehearsals / performances, involvement or participation in choir and singing related events or activities as provided herein, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

Parent/Guardian Name (PRINT)

Parent/Guardian Signature

Date Signed

Emergency Phone Number(s)