



**Assumption of the Risk and Waiver of Liability**  
**Relating to Coronavirus/COVID-19**

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is extremely contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Charles M. Schulz Museum (CMSM) has put in place preventative measures to reduce the spread of COVID-19; however, CMSM **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. Further, **volunteering for CMSM camps could increase** your risk and your child(ren)'s risk of contracting COVID-19.

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By signing this agreement, I acknowledge the 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 by volunteering for CMSM Museum Galleries, Education Room, and/or Othmar Hall camps or classes, 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 CMSM may result from the actions, omissions, or negligence of myself and others, including, but not limited to, shelter employees, volunteers, and adopters 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, 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 my child(ren)'s presence at CMSM Museum Galleries, Education Room, and/or Othmar Hall camps or classes. On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless CMSM, its employees, agents, and representatives, 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 CMSM, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any CMSM program.



I also agree that neither I nor my minor child/children shall participate as volunteers or visit the CMSM Museum Galleries, Education Room, and/or Othmar Hall camps or class sites if I or they are experiencing symptoms of COVID-19, including, without limitation, fever, cough or shortness of breath; or if I or they have been exposed to anyone with a diagnosed/confirmed case of COVID-19 within the prior ten days. I agree to notify the camp director immediately if I believe that any of those conditions apply.

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**Signature of Parent/Guardian**                      **Date**

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**Name of Parent/Guardian**                      **Name of Junior/Student  
Volunteer(s)**