

# **Assumption of Risk, Waiver of Liability, and Indemnity Agreement Relating to COVID-19**

In consideration of the opportunity to participate in equine activities and social functions sponsored by the Rappahannock Hunt (RH), the Warrenton Hunt (WH), the Piedmont Fox Hounds (PFH), the Orange County Hounds (OCH), the Old Dominion Hounds (ODH), the Blue Ridge Hunt (BRH), Loudoun Hunt (LH), the Middleburg Hunt (MH) and the Virginia Point to Point Foundation (VPPF). including activities and functions on the real property of landowners whose land is used by any of the mentioned above (Landowner(s)), the undersigned, as set forth herein (Agreement) agrees as follows:

The Coronavirus (COVID-19), has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and can spread from person-to-person and from contact with infected surfaces.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by attending the event, and that such exposure or infection may result in personal injury, illness, permanent disability, or death. I understand risk of becoming exposed to infected by COVID-19 at the event may result from or by caused the actions, omissions, or negligence of myself and others, including, but not limited, RH, WH, PFH, OCH, ODH, BRH, LH, MH and VPPF its masters, staff, agents, employees, members, landowners, other event participants or attendees, or other third parties.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I may experience or incur in connection with my attendance or participation in this event. On my behalf hereby agree to indemnify, release, covenant not to sue, discharge, and hold harmless 1) RH, WH, PFH, OCH, ODH, BRH, LH, MH and VPPF its masters, staff, agents, employees, members, and guests; and (ii) Landowner, its agent, employees, tenants and guests from any claims or causes of action of any kind arising or related thereto.

**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.**

Printed name: \_\_\_\_\_

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

Date signed: \_\_\_\_\_

**FOR PARTICIPANTS OR ATTENDEES OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION) OR OTHERWISE UNDER A LEGAL DISABILITY**

If the participant or attendee is a minor or otherwise under a legal disability, this agreement shall be signed by participant or attendee's parent or legal guardian. By signing, the parent or legal guardian expressly acknowledges and agrees to all provisions of this agreement, on behalf of such participant or attendee, and further releases and waives, now and forever, any and all potential claims that such participant or attendee, as well as their estate, agent, heirs or assigns may have, now or in the future, against RH, WH, PFH, OCH, ODH, BRH, LH, MH and VPPF, its masters, staff, agents, employees, members, landowners, other event participants or attendees, or other third parties.

Printed Name of Parent or Legal Guardian: \_\_\_\_\_

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

Date signed: \_\_\_\_\_

## Pre-Race Meet Screening Questionnaire

Prior to entry to the Race Meet grounds, all entrants must fill out this health self-assessment questionnaire. Please fill it out the morning of the Races and be prepared to deliver it to authorities upon arrival at the gate. You will then have your temperature taken. Anyone with a temperature of over 100.4 or with any "Yes" answers to the questions below will not be allowed admittance under any circumstances. These procedures are mandated by the Virginia Department of Health in order to conduct this race meet. Thank you very much for your cooperation in advance.

- A new fever (100.4 degrees F or higher) or a sense of having a fever?

YES

NO

- A new cough that cannot be attributed to another health condition.

YES

NO

- New shortness of breath that cannot be attributed to another health condition?

YES

NO

- New chills that cannot be attributed to another health condition?

YES

NO

- A new sore throat that cannot be attributed to another health condition.

YES

NO

- New muscle aches (myalgia) that cannot be attributed to another health condition or specific activity (such as physical exercise)?

YES

NO

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Print Name

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Signature

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Date