

COVID-19 Safety Acknowledgment Liability Waiver Contact Tracing and Release of Claims

COVID-19 SAFETY INFORMATION:

While participating in events held or sponsored by the Islamic Center of Daytona Beach ICDB “social distancing” must be practiced and face coverings worn at all times to reduce the risks of exposure to COVID-19. Because COVID-19 is extremely contagious and is spread mainly from person-to-person contact, ICDB has put in place preventative measures to reduce the spread of COVID-19. However, ICDB cannot guarantee that its participants, volunteers, or others in attendance will not become infected with COVID-19. For the safety of the attending individuals and due to limited space available during the Friday prayers, ICDB activities is limited for adult participants until further notice.

In light of the ongoing spread of COVID-19, individuals who fall within any of the categories below should not engage in ICDB events and/or activities. By attending a ICDB event, you certify that you do not fall into any of the following categories:

1. Individuals who currently or within the past fourteen (14) days have experienced any symptoms associated with COVID-19, which include fever, cough, and shortness of breath among others;
2. Individuals who have traveled at any point in the past fourteen (14) days either internationally or to a community in the U.S. that has experienced or is experiencing sustained community spread of COVID-19; or
3. Individuals who believe that they may have been exposed to a confirmed or suspected case of COVID-19 or have been diagnosed with COVID-19 and are not yet cleared as non-contagious by state or local public health authorities or the health care team responsible for their treatment.
4. ICDB will strictly adhere to the conditions of attendance and will deny participation to any individual that will not follow these conditions of attendance.

DUTY TO SELF-MONITOR:

Participants and volunteers agree to self-monitor for signs and symptoms of COVID-19 (symptoms typically include fever, cough, and shortness of breath) and, contact icdb.org if he/she experiences symptoms of COVID-19 within 14 days after participating or volunteering with ICDB.

CONTACT TRACING ACTIVITIES

ICDB will follow professional standards for handling confidential information include providing assigned contact tracing personnel with appropriate information and/or training regarding confidential guidelines and legal regulations. All persons involved in contact tracing activities with access to such information have signed a confidentiality statement acknowledging the legal requirements not to disclose COVID-19 information. Efforts to locate and communicate with attendees and close contacts will be carried out in a manner that preserves the confidentiality and privacy of all involved. This includes never revealing the name of the attendee to a close contact unless permission has been given (preferably in writing), and not giving confidential information to third parties (e.g., roommates, neighbors, family members).

Maintaining confidentiality during COVID-19 case investigations and contact tracing can be particularly difficult in congregate settings. ICDB will maintain the record of attendees for a period of 30 calendar days. If no COVID-19 case has been reported all records will be disposed of properly. All personal information regarding any attendee and contacts should be afforded the same protections. This includes any and all records. Data and security protocols includes recommendations for password-protected computer access, as well as locked confidential storage cabinets and proper shredding and disposal of notes and other paper records. Approaches to ensuring confidentiality and data security were included in training of staff.

LIABILITY WAIVER AND RELEASE OF CLAIMS:

I acknowledge that I derive personal satisfaction and a benefit by virtue of my participation and/or voluntarism with ICDB, and I willingly engage in ICDB events and/or other activities.

RELEASE AND WAIVER.

I HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE ANY AND ALL LIABILITY, CLAIMS, AND DEMANDS OF WHATEVER KIND OR NATURE AGAINST THE ISLAMIC CENTER OF DAYTONA BEACH INCLUDING IN EACH CASE, WITHOUT LIMITATION, THEIR DIRECTORS, OFFICERS, EMPLOYEES, VOLUNTEERS, AND AGENTS (THE "RELEASED PARTIES"), EITHER IN LAW OR IN EQUITY, TO THE FULLEST EXTENT PERMISSIBLE BY LAW, INCLUDING BUT NOT LIMITED TO DAMAGES OR LOSSES CAUSED BY THE NEGLIGENCE, FAULT OR CONDUCT OF ANY KIND ON THE PART OF THE RELEASED PARTIES, INCLUDING BUT NOT LIMITED TO DEATH, BODILY INJURY, ILLNESS, ECONOMIC LOSS OR OUT OF POCKET EXPENSES, OR LOSS OR DAMAGE TO PROPERTY, WHICH I, MY HEIRS, ASSIGNEES, NEXT OF KIN AND/OR LEGALLY APPOINTED OR DESIGNATED REPRESENTATIVES, MAY HAVE OR WHICH MAY HEREAFTER ACCRUE ON MY BEHALF, WHICH ARISE OR MAY HEREAFTER ARISE FROM MY PARTICIPATION WITH THE ACTIVITY.

ASSUMPTION OF THE RISK.

I acknowledge and understand the following:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist;
2. I knowingly and freely assume all such risks related to illness and infectious diseases, such as COVID-19, even if arising from the negligence or fault of the Released Parties; and
3. I hereby knowingly assume the risk of injury, harm and loss associated with the Activity, including any injury, harm and loss caused by the negligence, fault or conduct of any kind on the part of the Released Parties.

MEDICAL ACKNOWLEDGMENT AND RELEASE.

I acknowledge the health risks associated with the Activity, including but not limited to transient dizziness, lightheaded, fainting, nausea, muscle cramping, musculoskeletal injury, joint pains, sprains and strains, heart attack, stroke, or sudden death. I agree that if I experience any of these or any other symptoms during the Activity, I will discontinue my participation immediately and seek appropriate medical attention. I DO HEREBY RELEASE AND FOREVER DISCHARGE THE RELEASED PARTIES FROM ANY CLAIM WHATSOEVER WHICH ARISES OR MAY HEREAFTER ARISE ON ACCOUNT OF ANY FIRST AID, TREATMENT, OR SERVICE RENDERED IN CONNECTION WITH MY PARTICIPATION IN THE ACTIVITY.

As a participant, volunteer, or attendee, you recognize that your participation, involvement and/or attendance at any ICDB event or activity ("Activity") is voluntary and may result in personal injury (including death) and/or property damage. By attending, observing or participating in the Activity, You acknowledge and assume all risks and dangers associated with your participation and/or attendance at the Activity, and You agree that: (a) the ICDB (b) the property or site owner of the Activity, and (c) all past, present and future affiliates, successors, assigns, employees, volunteers, vendors, partners, directors, and officers, of such entities collectively, the "Released Parties"), will not be responsible for any personal injury (including death), property damage, or other loss suffered as a result of your participation in, attendance at, and/or observation of the Activity, regardless if any such injuries or losses are caused by the negligence of any of the Released Parties (collectively, the "Released Claims"). BY ATTENDING AND/OR PARTICIPATING IN THE ACTIVITY, YOU ARE DEEMED TO HAVE GIVEN A FULL RELEASE OF LIABILITY TO THE RELEASED PARTIES TO THE FULLEST EXTENT PERMITTED BY LAW.

By Signing Below,

I _____ acknowledge acceptance of all conditions and releases

Signature*

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