

MTJA Spring 2022 Conference - Acknowledgement, Assumption of Risk, and Waiver of Liability

Dear Participant:

The Fort Wayne and Allen County Convention & Visitors Bureau (CVB) is pleased to host you for the 2022 MTJA Spring Conference, April 29 – May 3, 2022. In order for you to enjoy all of the special activities we have curated for you, please read and sign the acknowledgement, assumption of risk, and waiver of liability below.

I, (print first and last name), a participant in Visit Fort Wayne FAM, coordinated by the CVB, do hereby:

1. RELEASE, WAIVE, AND DISCHARGE the Allen County CVB, their agents, representatives and employees, from all claims and all liability to me, my personal representatives, heirs or assigns for any and all injury, loss, damage, accident, delay or other expense incurred related to the above event, the use of any vehicle, war, terrorist act, weather, sickness (including but not limited to COVID-19), quarantine, government restrictions or regulations, or arising from any act or omission of any transportation carrier, hotel, restaurant or any other firm, agency, company or individual.

2. Affirm that I do not have, and have not had within the previous two weeks, any of the following:

- a. A fever, a feeling of feverishness, or chills
- b. A cough or sore throat
- c. Shortness of breath or difficulty breathing
- d. Muscle pain
- e. Loss of taste or smell
- f. GI upset or diarrhea
- g. Any other flu-like symptoms
- h. Contact with any other person who has tested positive for COVID-19 or who has exhibited any of the above symptoms
- i. A positive COVID-19 test

3. I affirm that in the event that I do experience any of the above symptoms within two weeks of my travel date, or if I have any travel within any of the locations identified on the itinerary, I will immediately notify Allen County CVB. I understand that Allen County CVB may cancel or postpone the FAM trip in the event that I experience COVID-19 symptoms or visit any of the above locations within two weeks of my travel date.

3. Agree to follow the CDC's current guidelines and recommendations for reduction of COVID-19 spread contained at the following link:

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>.

4. I understand that regardless of these precautions, there is always a risk of exposure to the novel coronavirus, the highly contagious pathogen that causes COVID-19, in traveling, being in close contact with other individuals, and/or visiting any public location. I understand that COVID-19 may cause severe illness, up to and including death, and that this risk exists for all individuals but is increased for individuals with certain preexisting medical conditions, including but not limited to individuals with diseases and disorders of the lung, people who are immunocompromised, people with HIV, people with liver disease, people with a BMI of 40 or higher, people who are 65 years old and older, people with certain heart conditions, people with diabetes, and people with chronic

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kidney disease. By attending this FAM trip, I voluntarily assume all risk associated with exposure to the novel coronavirus and/or contraction of COVID-19.

5. WAIVE AND CONVENANT NOT TO SUE on any claim or demand I may have, or any of my personal representatives, heirs or assigns may have on account of any and all injury, loss or damage to my person or property whether caused by the negligence of the Allen County CVB, its agents, representatives and employees or otherwise while I participate in the above event.

6. ASSUME FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, OR PROPERTY DAMAGE due to the negligence of the Allen County CVB, its agents, representatives and employees or otherwise while participating in the above event.

7. RELEASE the Allen County CVB, their agents, representatives and employees, and agree to indemnify them with regard to any financial obligation or liabilities that I may personally incur or any damage or injury to others I may cause while participating in the fam trip.

8. ACKNOWLEDGE that the Allen County CVB will not provide on my behalf any insurance such as casualty, accident, and liability insurance to cover liability for death, personal injury, illness, property loss or property damage resulting from my participation in the fam trip.

9. AFFIRM AND STATE that I have read and do voluntarily sign this acknowledgement, assumption of risk, and waiver of liability and that no oral representations, statements or inducements apart from the foregoing written agreement have been made.

Please note that we cannot allow you to participate in the familiarization trip until you have signed this waiver and returned it to us.

Signature: _____

Printed Name: _____

Date: _____