



COVID 19 Waiver of Liability

I, _____ parent of _____ understands that the novel coronavirus (COVID- 19) respiratory infection have been confirmed throughout the United States, including cases in New Jersey. In accordance with the most recent guidance and protocols issued by the World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC) and the New Jersey Department of Health for slowing transmission of COVID-19, furthermore I understand that Prime Time All Stars LLC have put preventive measures in place to reduce the spread of COVID -19; however Prime Time All Stars LLC cannot guarantee that you or your child(ren) will not become infected with COVID-19. I further acknowledge that it is my responsibility to monitor the health and wellness of my family and child(dren) and also acknowledge that it is my responsibility to inform Prime Time All Stars LLC should I, or anyone in my immediate household have a direct exposure to any person who has a suspected or confirmed case of COVID-19. In addition, I understand and agree that if it occurs I, or my child will not visit the facility for 14 days to minimize exposure to others at Prime Time All Stars LLC.

I understand Prime Time All Stars LLC cannot guarantee that you or your child(ren) will not become infected with COVID-19. By signing this agreement, I acknowledge the contagious nature of COVID -19 and voluntarily assume all risks that my child(dren) and I may be exposed to and/or infected by COVID-19 by attending Prime Time All Stars LLC activities and that such exposure or infection may result in personal injury, illness, financial loss, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID -19 at Prime Time All Stars LLC may result from the actions, omissions, or negligence of myself and others and agree to indemnify, defend, and hold harmless Prime Time All Stars LLC, staff and volunteers against any and all costs, expense, damages, claims, lawsuits, judgement, losses and/or liabilities (including attorney fees) arising either directly or indirectly from or related to any and all claims made by or against any of the released parties or otherwise specifically related to COVID-19. I agree that I have and will follow all rules and procedures put in place by Prime Time All Stars LLC following CDC guidelines to limit the spread.

By signing below I agree that I have read and acknowledge the waiver and I have been properly informed about the risks involved with participating in Prime Time All Stars LLC activities during the COVID-19 global pandemic.

Parent/Guardian Signature

Date

Witness Signature

Date