

Programs at Providence Zen Center Communication and Preparation:

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.

The Organizing Organization (OO) has put in place preventative measures to reduce the spread of COVID-19; however, OO cannot guarantee that you will not become infected with COVID-19. Further, attending OO programs could increase your risk of contracting COVID-19.

By checking the box on the registration form related to this page, 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 OO programs 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 during OO programs may result from the actions, omissions, or negligence of myself and others, including, but not limited to, OO, employees, volunteers, and program participants and their families.

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 in OO programming (“Claims”). On my behalf, I hereby release, covenant not to sue, discharge, and hold harmless OO, its employees, agents, and representatives, of and from the Claims, 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 OO, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any OO program.

In Addition, “I understand that my name and contact information might be shared with the Florida State health department in the event that a client or practitioner at this facility tests positive for COVID-19. My contact details will only be shared in the event they are relevant based on suspected exposure date, and only for appropriate follow-up by the health department.”

In-Person Considerations:

Room, Board, and Classroom and Common Areas at PZC: I understand that there may be people without a Covid-19 vaccination on the Providence Zen Center property.

During the Training: OO will follow the most up to date Federal, State, and County (of Florida) orders and guidance as it relates to safety while teaching an in-person program.