

COVID-19 AND OTHER INFECTION AND CONTAGIOUS DISEASE
ADDENDUM

NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN

READ THIS FORM COMPLETELY AND CAREFULLY

YOU ARE AGREEING TO LET YOUR MINOR CHILD ENGAGE IN A POTENTIALLY DANGEROUS ACTIVITY. YOU ARE AGREEING THAT, IN ADDITION TO THE RISKS IDENTIFIED AND ACKNOWLEDGED ABOVE IN 1) THE NOTICE TO THE MINOR CHILD'S NATURAL GUARDIAN, 2) THE MINOR WAIVER/RELEASE OF LIABILITY FOR MINOR PARTICIPANTS, 3) THE AGREEMENT TO PARTICIPATE, AND 4) THE WAIVER, RELEASE OF LIABILITY AND INDEMNIFICATION AGREEMENT, EACH OF THESE FORMS SIGNED AND EXECUTED BY YOU, THAT THERE IS A CHANCE YOUR CHILD MAY BE EXPOSED, OR EXPOSE OTHERS TO CONTAGIOUS AND POTENTIALLY HARMFUL OR DEADLY DISEASE INCLUDING, BUT NOT LIMITED TO, INFLUENZA, COMMON COLD, CHICKEN POX, MENINGITIS, MEASLES, DERMATOPHYTOSIS OR OTHER FUNGAL INFECTIONS, STAPHYLOCOCCUS OR OTHER BACTERIAL INFECTIONS, AND COVID-19 OR OTHER VIRAL INFECTIONS. YOU ARE AGREEING THAT, EVEN IF ELEV8 SPORTS INSTITUTE OR ANY OF ITS REPRESENTATIVES, DONALD AND JULIE UDERITZ, OR ANY OF THE COACHES OR INSTRUCTORS USE REASONABLE CARE IN PROVIDING THIS ACTIVITY, THERE IS A CHANCE YOUR CHILD MAY BE SERIOUSLY INJURED OR KILLED BY PARTICIPATING IN THIS ACTIVITY BECAUSE THERE ARE CERTAIN DANGERS INHERENT IN THE ACTIVITY WHICH CANNOT BE AVOIDED OR ELIMINATED.

BY SIGNING THIS ADDENDUM YOU ARE GIVING UP YOUR CHILD'S RIGHT AND YOUR RIGHT TO RECOVER FROM ELEV8 SPORTS INSTITUTE OR ANY OF ITS REPRESENTATIVES, DONALD OR JULIE UDERITZ, OR ANY OF THE COACHES OR INSTRUCTORS IN A LAWSUIT FOR ANY PERSONAL INJURY, INCLUDING DEATH, TO YOUR CHILD OR ANY PROPERTY DAMAGE THAT RESULTS FROM THE RISKS ASSOCIATED WITH THIS ACTIVITY, INCLUDING EXPOSURE TO ANY DISEASE, INCLUDING BUT NOT LIMITED TO COVID-19, AND ALL THE RISKS ASSOCIATED THEREWITH.

YOU HAVE THE RIGHT TO REFUSE TO SIGN THIS FORM, AND ELEV8 SPORTS INSTITUTE OR NY OF ITS REPRESENTATIVES, DONALD AND JULIE UDERITZ, OR ANY OF THE COACHES OR INSTRUCTORS HAS THE RIGHT TO REFUSE TO LET YOUR CHILD PARTICIPATE IF YOU DO NOT SIGN THIS FORM.

SIGNATURE OF PARENT/GUARDIAN: _____ DATE: _____

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