

In-Person Program Entry Waiver – Directed to In-Person Program/Service Participants:

I recognize and acknowledge that risk of injury may be involved with participation in the programs. I voluntarily and willingly agree to assume the full risk of any and all injuries. I do release and forever discharge Sunshine Centres for Seniors (SCS), together with its directors, officers, employees, agents and representatives from any and all actions, damages, claims and demands whatsoever that I may have. I acknowledge the contagious nature of the Coronavirus/COVID-19 and that Toronto Public Health and SCS and many other public health authorities still recommend practicing social distancing. I further acknowledge that SCS has put in place preventative measures to reduce the spread of the Coronavirus/COVID-19.

I further acknowledge that SCS can not guarantee that I will not become infected with the Coronavirus/Covid-19. I understand that the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, SCS staff, volunteers and members and their families. I voluntarily seek programs and services provided by SCS and acknowledge that I am increasing my risk to exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread while attending any programs or services at all SCS program locations.

I attest to that:

- I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
- I have not traveled internationally within the last 14 days.
- I have not traveled to a highly impacted area within the United States of America in the last 14 days.
- I do not believe I have been exposed to someone with a suspected and/or confirmed case of the Coronavirus.
- I have not been diagnosed with Covid-19 and not yet cleared as non contagious by local public health authorities.
- I am following SCS and local health authorities recommended guidelines and limiting my exposure to COVID-19.

I hereby release and agree to hold Sunshine Centres for Seniors harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of the Centre, or that may otherwise arise in any way in connection with any programs and/or services received from SCS. I understand that this waiver discharges SCS from any liability or claim that I, my heirs, or any personal representatives may have against SCS with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any programs/services received from SCS. This liability waiver extends to Sunshine Centres for Seniors Corporation, Board of Directors, Volunteers, Staff and Members.

Program Participant: _____

Dated: _____

Location: _____