



Zoo Waiver & Release: Event Participation

Name of Event Attendee (Please Print): _____

Date: _____ Event: _____

Email Address: _____

Today's Health Attestation: I attest that, at the time of this event, I do not have symptoms of COVID-19 as detailed by the Centers for Disease Control and Prevention. Specifically, I do not have and am not showing symptoms of any of the following: **fever, chills, shortness of breath, headache, sore throat, or loss of taste or smell.** I attest that I have not tested positive for COVID-19 in the past 14 days, and that I have not had exposure to someone who tested positive for COVID-19 in the past 14 days. I attest that I did not take a COVID-19 test in the past 14 days because I believed that I had COVID-19 symptoms or was exposed to someone with COVID-19.

General Waiver and Release: In consideration for entrance to Zoo, I assume the risk of visiting the Zoo and participating in any activity while in, on, or around the Zoo and/or while using any Zoo facilities, exhibits, programs, materials, or amenities. I further agree, on behalf of myself and my family, estate, heirs, executors, administrators, assigns, and personal representatives, to release, discharge, indemnify, and hold harmless THE MARYLAND ZOO IN BALTIMORE, THE MARYLAND ZOOLOGICAL SOCIETY, the CITY OF BALTIMORE, the STATE OF MARYLAND, their board members, directors, officers, agents, servants, independent contractors, affiliates, employees, volunteers, successors, and assigns (collectively, the "Released Parties") from any and all liability arising from injury or death, property damage or other loss experienced by me. This release and waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown.

COVID Waiver and Release: I acknowledge and accept that it is my responsibility to comply with the guidelines of the City of Baltimore and the State of Maryland relating to COVID-19. Because the Zoo is open for use by other individuals, I recognize that I am at higher risk of contracting COVID-19. With full awareness and appreciation of the risks involved, I on behalf of myself, my family, estate, heirs, executors, administrators, assigns, and personal representatives, hereby release, discharge, hold harmless, and covenant not to sue the Released Parties from any and all liability, claims, demands, actions, and causes of action whatsoever, directly or indirectly arising out of or related to any loss, damage, or injury, including death, that may be sustained by me related to COVID-19, whether caused by the Zoo, the negligence of the Released Parties, any third-party using the Zoo, or otherwise, while participating in any activity while in, on, or around the Zoo and/or while using any Zoo facilities, exhibits, programs, materials, or amenities.

By signing below, you are agreeing to the waiver as it is stated above.

Signature: _____

Signature of Parent/Guardian (needed if Event Attendee is under age 18):

Signature: _____ **Printed Name:** _____