

WAIVER OF RISK - POOL USE AGREEMENT

I understand and agree that, due to the ongoing Coronavirus (COVID-19) issue, there exists a risk that I or members of my household (family) may become infected with a virus (and possibly pass that infection on to others) as a result of my use of the pools, spas and surrounding areas, including restrooms & showers (aka: "Pool Area"), and I further understand that there can be no guaranty of complete safety when using the Pool Area.

I further understand and agree that I am (we are) choosing to use the Pool Area at my (our) own risk which, all risk I (we) voluntarily assume and evidence by my execution of this Agreement. I further agree that I (we) will not hold the Association, nor any Board Member of the Association, nor Management and its employees, responsible or liable for any actual, perceived, or potential damages (whether physical, emotional, or otherwise), directly or indirectly related to any infection which I or members of my household (family) may acquire or transmit, whether or not such could be connected with my use of the Pool Area.

I also further agree that, should anyone claim to have acquired an infection from me or my household (family), as a result of having used the Pool Area, I will indemnify and hold harmless the Association, Its Board Members, and Management from any claim or action that may be made by others.

The Association has adopted rules and guidelines. I have read these guidelines and will share them with my household (family). I understand that my permission to use the Pools is conditioned upon my (our) agreement to obey the rules and guidelines that have been adopted by the Association. If I or those of my household (family) refuse to obey the rules, my right to use the Pool Area shall be suspended.

With my signature, below, I, on behalf of my household (family), agree to all of the above statements and understand that my (our) permitted use of the Pools is conditioned upon my (our) agreement and adherence to all of the above statements.

Signature: _____ Dated: _____

Print Name: _____

Address: _____

List household / Family members: _____
