

PARTICIPANT LIABILITY RELEASE & WAIVER

Print Participant's Name	
rele wh	xchange for the opportunity to participate in a program or activity sponsored by The Sands Point Preserve Conservancy, I hereby ease The Sands Point Preserve Conservancy, Inc., Nassau County, and the Incorporated Village of Sands Point of any liability atsoever and covenant not to bring any lawsuit in connection with any damages, injuries, or illness that I and my child may tain as a result of our participation in any programs or activities at the Sands Point Preserve.
all	owingly, freely, and expressly assume all risks associated with the program or activity and expressly waive my rights to any and actions, suits, demands, losses, liability, claims, or causes of action that can be alleged or brought under the laws, codes, and cutes of any and all state, federal, foreign, local, or territorial jurisdictions for such risks, damages, injuries, or illness.
inc	ree to comply with all laws, regulations, codes, rules, and other directives of any municipality or governmental authority, uding but not limited to the United States, the State of New York, Nassau County, and the Incorporated Village of Sands Point, uding New York State and CDC requirements for health safety.
Wi	hin the last ten days of each class in which my child participates:
1) 2)	No members of my household, including myself, have experienced symptoms of fever, extreme fatigue, difficulty breathing, dry cough, or any other symptoms associated with COVID-19 and variants, nor have we been diagnosed with COVID-19 or variants. To the best of my knowledge, no teacher or students my child's class at school has been diagnosed with COVID-19 or variants.
l cc	nfirm that my child has been fever-free for a minimum of 24 hours prior to the start of each class.
I he	reby acknowledge the following:
1) 2)	COVID-19 and variants can cause serious and potentially life threatening illness and even death. The Sands Point Preserve Conservancy, Inc., Nassau County, and the Village of Sands Point cannot prevent me or my child from becoming exposed to, contracting, or spreading COVID-19 and variants, while visiting the preserve or participating in any programs and activities, nor can they prevent the presence of the diseases. I may be exposing myself, my child, other family members, and/or other persons to COVID-19 and variants, increasing the risk of contracting and/or spreading these diseases.
	ve read and understood the statements and the warning concerning COVID-19 and variants above and accept the risk of being osed to, contracting, and spreading the diseases for myself, my child, other family members, and/or any other persons.
By:	
•	Signature Date

Relationship to Participant

Print Name