



Agreement & Release for Communicable Diseases Including COVID-19

Directions: A completed waiver must be received to attend class. Forms are valid for one year, after which a new waiver is required. Please email to info@phillyartcenter.com ahead of your program start date for all locations.

First & Last Name: _____ **Date of Birth:** ____/____/_____

I agree to stay home if exhibiting two or more COVID symptoms and to stay home if otherwise feeling sick.

ASSUMPTION OF RISK/WAIVER OF LIABILITY/INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate in PAC programming, I, hereby acknowledge and agree that:

Participation includes possible exposure to and illness from infectious diseases including but not limited to influenza and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and

I authorize Philly Art Center, Art Mark LLC, and it’s authorized representatives, to take whatever actions it may consider warranted under the circumstances regarding my health and safety; and

I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe any unusual or significant hazard during my participation, I will not participate and bring such to the attention of PAC’s director immediately; and

I, for myself and all of my heirs, assigns, and personal representatives, **hereby release and hold harmless** Philly Art Center, Art Mark LLC, its director, teachers and all employees and authorized representatives, (“Releasees”), with respect to any and all illness, disability, death or damage to any persons that may occur, whether arising from the negligence of Releasees or otherwise, either directly or indirectly, as a result of my participation in PAC programming; and

I knowingly and freely assume all such risks of exposure to infectious diseases, both known and unknown, even if arising from the negligence of the Releasees or others, and assume full responsibility for my participation.

This will certify that I have read this release of liability and assumption of risk, fully understand its terms and that I have given up substantial rights by signing it. I do consent and agree to our release provided above for all of the Releasees and agree to indemnify and hold harmless the Releasees for any and all liabilities arising from my presence or participation, to the fullest extent provided by law.

Signature: _____ Date: _____

Print Name: _____