



EVENT ATTENDEE WAIVER AND RELEASE OF LIABILITY AGREEMENT

NIA continues to monitor policies and procedures during the COVID-19 pandemic. The safety and well-being of our members and event attendees is our top priority. Because COVID-19 is extremely contagious and is spread mainly from person-to-person contact, NIA has put in place preventative measures to reduce the spread of COVID-19. However, NIA cannot guarantee that its participants, volunteers, partners, or others in attendance will not become infected with COVID-19 while at NIA events.

Adherence to NIA event policies and guidelines will be continuously monitored, and NIA will use reasonable efforts to enforce such policies. Please review the agreement below (this Agreement). Additionally, your signature prior to the event will confirm your intent and agreement to abide by policies put in place to protect event attendees and staff.

Agreement:

If you are unable to answer affirmatively to any of the following bullets, you acknowledge that your access to the event could be denied prior to or on-site during the event. This is for the health and safety of all attendees. Thank you for your understanding.

- I declare I am not experiencing or exhibiting any COVID-19 related symptoms as outlined by the federal and state Centers for Disease Control and Prevention (CDC), such as fever, cough, or shortness of breath.
- I acknowledge I must follow the safety protocols that have been implemented by the CDC and the State's Governor.
- I declare I have not traveled internationally or to a highly impacted COVID-19 area within the United States during the last fourteen (14) days.
- I am not aware, nor do I believe I have been recently exposed to a person with a positive and confirmed case of COVID-19.
- I acknowledge I may be removed from an event or asked to leave by NIA Staff should I exhibit any behavior in violation of the CDC or the State Governor's safety protocols or if I exhibit signs of COVID-19.
- I agree to self-monitor for signs and symptoms of COVID-19 (symptoms typically include fever, cough, and shortness of breath) and contact NIA at events@insulation.org if I experience symptoms of COVID-19 within 14 days after participating at an NIA event.

Signature:

By signing this Agreement, I acknowledge the contagious and evolving nature of COVID-19 and voluntarily assume the risk that I may be exposed to the COVID-19 virus and become infected as a result. I understand the risk of becoming infected may impact event guests and attendees as well as their families or personal contacts.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any expense, liability, illness, injury, disability, or death I may incur related to contracting the COVID-19 virus or being exposed to the COVID-19 virus while attending an event hosted by NIA. I hereby release, covenant not to sue, discharge, and hold harmless NIA, and its directors, officers, members, employees, and agents, from all

claims of any kind arising out of COVID-19 or any claim that I contracted or was exposed to COVID-19 at an NIA event. I understand and agree that this release of liability includes any claims against NIA, its directors, officers, members, employees, and agents, whether a COVID-19 infection occurrence exists before, during, or after attendance and participation at an NIA event.

If event attendee is a minor child under the age of 18 years, said event attendee's adult parent(s) or legal guardian(s) shall be jointly and severally liable for the event attendee's performance of this Agreement and represent and warrant to NIA that they have full authority to enter into this Agreement on behalf of such minor. Adult parent(s) or legal guardian(s) agree to be bound by all terms of this Agreement, as indicated by our signatures below.

This Agreement shall be governed by and construed under the laws of the State of Virginia without regard to its choice of law principals. I agree not to commence or prosecute any action in connection herewith other than in the state and/or federal courts of Virginia.

Date: _____

Printed Name: _____

Company Name: _____

Signature: _____

(Parent/Guardian for Minor under Age 18)

Date: _____

Printed Name: _____

Printed Name: _____

Signatures: _____