# **Client COVID-19 Disclosure and Release of Liability**

Due to the 2019-2020 outbreak of the novel Coronavirus (COVID-19), our business is taking extra

precautions with the care of every client to include health history review and enhanced sanitation and

disinfecting procedures in compliance with CDC guidance. Therefore, in consideration of

, acknowledge the contagious nature of COVID-19 and the importance of adhering to best practices regarding social distancing and face coverings. I further acknowledge that Bridge To Wellness Centers LLC cannot guarantee that I will not become infected with the COVID-19 virus. I understand that the risk of becoming exposed to and/or infected with COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to staff, and other clients and their families. I understand that the COVID-19 virus has a long incubation period during which carries of the virus may not show symptoms and may still be highly contagious. It is impossible to determine who may or may not be a carrier at this time.

I voluntarily seek services provided by Bridge To Wellness Centers LLC and acknowledge that I am increasing my risk of exposure to COVID-19.

I am following all CDC recommended guidelines as much as possible and limiting my exposure to the COVID-19 virus.

I acknowledge that I must comply with all set procedures to reduce the spread while attending my appointment.

I am not experiencing any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell. My temperature has not exceeded 100 0 in the last 48 hours.

I have not been around anyone with these symptoms within the last 14 days, nor do I live with anyone who is sick or quarantined nor have I been notified that I should be self-quarantined.

I have not traveled internationally within the last 14 days and have not traveled outside the local area by commercial airline, train, or bus in the last 14 days.

I do not believe I have been exposed to someone with a suspected and/or confirmed case of COVID-19.

I have not been diagnosed with COVID-19 and not yet cleared as non-contagious by state or local public health authorities.

I hereby release and agree to hold Bridge To Wellness Centers LLC harmless from, and waive on behalf of myself, my heirs, and any personal representatives any and all causes of action, claims, demands, damages, costs, expenses and compensation for damage or loss to myself and/or property that may be caused by any act, or failure to act of Bridge To Wellness Centers LLC, or that may otherwise arise in any way in connection with any services received from Bridge To Wellness Centers LLC. I understand that this release discharges Bridge To Wellness Centers LLC from any liability or claim that l, my heirs, or any personal representatives may have against the practice with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to any services received from Bridge To Wellness Centers LLC. This liability waiver and release extends to the practice together with all owners, employees, and contractors.

Signature Print Name Date