

Western Chapter International Society of Arboriculture

ATTENDEE LIABILITY WAIVER AND ASSUMPTION OF RISK

Attendee assumes all risks and accepts sole responsibility for any injury (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that attendee may experience or incur in connection with attending the 88th Annual Conference. Attendee hereby releases, covenants not to sue, discharges, and holds harmless Western Chapter ISA, its agents, and representatives, of and from any such claims, including all liabilities, claims, actions, damages, costs, or expenses of any kind arising out of or relating thereto.

Specifically relating to the global COVID-19 pandemic, attendee acknowledges the highly contagious nature of COVID-19 and voluntarily assumes the risk of exposure or infection by attending the 88th Annual Conference, and that such exposure or infection may result in personal injury, illness, disability, and/or death to attendee. Attendee understands that the risk of becoming exposed to or infected by COVID-19 at the 88th Annual Conference may result from the actions, omissions, or negligence of others who may attend the event or their families, colleagues, or others with whom they may have contact. Accordingly, attendee understands and agrees that this release includes any claims based on the actions, omissions, or negligence of Western Chapter ISA, its agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in the 88th Annual Conference.

In addition to all other rules and regulations relating to the attendee's attendance at the 88th Annual Conference, attendee agrees to comply with all COVID-related procedures that may be implemented by Western Chapter ISA and Oakland Marriott, including, but not limited to, mask-wearing, and social distancing requirements and restrictions on certain activities that carry higher COVID-19 related risk, in order to protect as much as possible, the health and safety of all 88th Annual Conference attendees. I acknowledge that failure to complete this form, falsification of this form, or violation of Western Chapter ISA policies can result in removal from Western Chapter ISA events and disciplinary action.

COVID-19 ATTESTATION

In order to keep our event attendees healthy and to comply with state and local rules for event participation we require that all attendees follow the state's requirements for safe attendance practices including social distancing, wearing a mask at all times and use of hand sanitizer.

I agree to follow the policies and procedures approved by Western Chapter ISA when attending this event.

I certify that I have received a full FDA approved vaccination for the COVID-19 virus

I certify that I to the best of my knowledge I have not, nor have I had contact with a person who has tested positive for COVID-19 or associated variants during the last 14 days, nor have I experienced the symptoms of COVID-19 (fever, chills, severe headache, muscle pain or weakness, sore throat, diarrhea, shortness of breath or congestion) in the last 14 days. days.

Signature: _____

Date: _____

Printed Name: _____

Phone: _____