

Assumption of Risk and Waiver of Claims

This <_NASA/ CMS Conference_ > is being held on [_Sept 26-28, 2022_] at the American Geophysical Union Conference Center in Washington, D.C. Those choosing to attend the Event in-person must agree to the terms of this Assumption of Risk and Waiver of Claims (“Waiver”).

By signing this Waiver, the undersigned (“I” or “you”) acknowledge that you have made the decision to attend the Event in-person with the full understanding of the inherent risks of such decision and acknowledge and agree as follows:

- COVID-19 is an ongoing extremely contagious worldwide pandemic;
- Infection with COVID-19 infection can result from close proximity to others, person to-person contact, exposure to droplets/aerosols released by other attendees as a result of breathing, coughing, talking and normal interaction as well as by touching surfaces;
- By traveling to and/or attending the Event, I risk becoming exposed to or infected with COVID-19 as a result of my actions, omissions, or negligence, or those of other attendees or participants, including without limitation, AGU’s officers, directors, employees, agents, members or exhibitors;
- Contracting COVID-19 can result in personal injury, illness, permanent disability, and death, and persons with underlying medical conditions or who are over the age of 65 are considered to be at “high risk” and particularly susceptible to developing severe illness from COVID-19;
- AGU cannot guarantee that I will not become infected with COVID-19 during the Event;
- Attending the Event could increase my risk of contracting COVID-19.

To help minimize the potential for COVID-19 transmission, everyone attending the Event will be required to present proof of full vaccination, along with corresponding identification, upon arrival, in order to gain access to the facility. Unvaccinated patrons, such as those with a medical condition or a closely-held religious belief that prevents vaccination, may provide a negative COVID-19 test, conducted within **24 hours of the event date and approved by a health authority.**

I acknowledge and agree that it is my obligation to follow all recommended health and safety measures while attending the Event, including but not limited to:

- (i) Administer a self-temperature-check upon arrival, and follow the instructions dictated by the facility, should I register with a fever;
- (ii) Avoid person-to-person contact with other Event patrons, such as handshakes, high-fives, hugs or kisses;
- (iii) Maintain “social distancing” to the extent possible, in public spaces;
- (iv) Follow the face mask protocol for the facility & jurisdiction, that is in place at the time of the actual meeting dates;
- (v) Wash hands frequently throughout the day for at least 20 seconds or use hand sanitizer if hand washing is not readily available.

I acknowledge and agree that I am attending the Event voluntarily, and at my own risk. I hereby release, for myself, my heirs, assigns, personal representatives and next of kin, and do forever discharge, covenant not to sue, indemnify and hold harmless AGU, its directors, officers, agents, employees, members, and representatives, of and from any and all claims, liabilities, actions, damages, costs or expenses of any kind arising out of, in connection with, or relating to my attending or participating in the Event including, without limitation, any illness, damages, or injury whatsoever resulting from my attendance at the Event, participation in events related to the Event, exposure to an infectious disease (including Covid-19) or the manner in which the Event or its related events and activities are conducted (collectively, “Claims”). I understand and agree that this Waiver includes any Claims based on the actions, errors, omissions, or negligence of AGU, its directors, officers, agents, employees, members, and representatives, whether a condition giving rise to any Claims occurred before, during, or after I attended or participated in the Event.

I understand that AGU is under no obligation to provide medical aid in case of accident or illness. However, should an accident or illness occur, I give AGU (or its representatives or staff) permission to seek immediate medical aid, and I further agree to hold harmless AGU and its respective officers, directors, members, staff and representatives from any liability for illness, death, injury, loss or damage related in any way to the provision, or lack of provision, of medical aid.

Failure to comply may result in denial of access to the facility and/or admittance to the Event. AGU may update safety protocols and procedures at any time in its sole discretion.

I affirm I have carefully read this Waiver, understand its terms and conditions, and agree to be bound by all terms and conditions.

ATTENDEE’S NAME (PRINT):

ATTENDEE’S SIGNATURE:

ATTENDEE’S PARENT/GUARDIAN SIGNATURE* (IF ATTENDEE IS A MINOR):

*You are releasing AGU on behalf of yourself and your minor child.

DATE: ____/____/____