

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

PhlebotomyU has put in place preventative measures to reduce the spread of COVID-19; however, PhlebotomyU cannot guarantee that you will not become infected with COVID-19. Further, participating in PhlebotomyU's in-classroom instruction and thereafter a clinical internship at a local clinic or hospital will increase your risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by participating in in-classroom instruction and clinical internship activities and that such exposure or infection may result in personal injury, illness, permanent disability, and/or death. I understand that the risk of becoming exposed to or infected by COVID-19 at PhlebotomyU or during my clinical internship may result from the actions, omissions, or negligence of myself and others, including, but not limited to, PhlebotomyU employees, clinical partners, and agents.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to me or others (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or others may experience or incur in connection with my participation in PhlebotomyU in-classroom activities and during my clinical internship ("Claims"). I hereby release, covenant not to sue, discharge, and hold harmless PhlebotomyU and its employees, agents, partners, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of PhlebotomyU and its employees, agents, clinical partners, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any PhlebotomyU in-classroom instruction, clinical internship or related activity.

Student Name

Signature

Date