

# Precautionary Covid – 19 Liability Release Form

Due to the 2019-2020 Pandemic of the Covid – 19, I am taking extra precautions with the intake of each client, health history review, as well as sanitation and disinfecting practices. Please complete the following and sign below.

Common symptoms of COVID – 19 may include some of the following: (but not limited to)

- Dry cough
  - Fatigue/tiredness
  - Fever
  - Shortness of breath
- Other possible symptoms include:  
Sore throat, Body aches/pain, headache

I \_\_\_\_\_ agree to the following:

- I, as well as all household members, have not been diagnosed with COVID-19 within the last 30 days.
- I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced the symptoms listed above within the last 14 days.
- I, as well as all household members, have not traveled outside of the country, or to any city outside of our own that is or has been considered a “hot spot” for COVID – 19 infections within the last 30 days.
- I understand that this business, June Allen R.E., cannot be held liable for any exposure to the virus or any other contagion cause by misinformation on this form or the health history provided by each client. Furthermore, I agree to not hold June Allen R.E. or any associates if I do contract COVID-19 or any other contagion as I have decided to come here on my own free will.

By signing below, YOU agree to each above statement and release June Allen R.E. and business from any and all liability for the unintentional exposure or harm due to COVID-19.

In addition, I, June Allen, abide by these same standards. I have improved and expanded my sanitation protocols to more thoroughly fight the spread of COVID – 19 and other communicable conditions.

Signature \_\_\_\_\_ Date \_\_\_\_\_

