



Sudbury Senior Center
Council on Aging
Town of Sudbury, Massachusetts

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**Waiver of Liability and Hold Harmless Agreement
Sudbury Senior Center Participant/Recipient of a Volunteer Service/Program**

I, _____, the undersigned, voluntarily agree to be a participant/recipient of one or more of the Town of Sudbury Senior Center Volunteer Programs/Services, including but not limited to those listed in APPENDIX 1 enclosed. These services may take place at a senior's residence, the Senior Center, within an automobile, a Town building, or local or non-local office or business.

I am aware and acknowledge that the novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization, is extremely contagious, and is believed to be spread mainly from person-to-person contact. While the Town of Sudbury Senior Center has taken measures in an effort to reduce the spread of COVID-19, I acknowledge that the Town cannot guarantee that I will not become infected with COVID-19 and I acknowledge that being a participant/recipient of any Volunteer Program/Service may increase my risk of contracting COVID-19.

I understand the symptoms listed in Appendix 2, prior to being a participant/recipient of a Volunteer Service/Program, I will affirm that:

I, as well as all household members, do not currently have, nor have experienced the symptoms listed in Appendix 2 within the last 14 days.

I, as well as all household members, have not been diagnosed with COVID-19 within the past 14 days.

I have not been considered a "close contact" to someone who has been diagnosed with COVID-19 or is awaiting COVID-19 test results at this time.

I, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the past 14 days.

I, as well as all household members, have not traveled outside of the country, or to any US state or city considered to be a "hot spot" for COVID-19 infections within the past 14 days. If I or any household member have traveled outside of MA within the past 14 days, we have complied with all current travel requirements in place by the State of MA related to COVID-19.

I agree to notify the appropriate staff of the Sudbury Senior Center immediately if I experience symptoms listed in Appendix 2, have confirmed exposure to the virus, or I have tested positive for the virus within 14 days of being a participant/recipient of its' Volunteer Programs/Services.

I understand the hazards of COVID-19 and am familiar with the CDC (Center for Disease Control) guidelines regarding COVID-19. I acknowledge and understand that the circumstances regarding COVID-19 are changing from day to day and that, accordingly, the CDC guidelines are regularly modified and updated and I accept full responsibility for familiarizing myself with the most recent updates.

I agree to comply with all safety protocols as required by the Senior Center, including wearing a mask at all times when receiving volunteer service(s), and other protocols issued by the CDC which are subject to change.

Notwithstanding the risks associated with COVID-19, which I readily acknowledge, I hereby choose to be a participant/recipient of one or more of the Volunteer Programs/Services.

I understand that by being a participant/recipient of Volunteer Programs/Services, I might be in situations where maintaining 6 feet of distance might not be possible.

I acknowledge and fully assume the risk of illness or death related to any and all illness or injury, including, but not limited to, COVID-19, arising from my being a participant/recipient of Volunteer Programs/Services. I agree to forever release, waive, discharge, and covenant not to sue the Town of Sudbury and the Sudbury Senior Center, and all their employees, officials, agents, board members, other volunteers and any and all individuals involved in the Volunteer Programs/Roles, from any liability related to any and all illness or injury, including, but not limited to, COVID-19, which might occur as a result of my being a participant/recipient of Volunteer Programs/Services.

The terms of this Release shall also be binding as to any other persons, including family members, heirs, executors, or administrators. I understand that this is a binding contract that supersedes any other agreements or representations and is intended to provide a comprehensive release of liability but is not intended to assert any defenses which are prohibited by law. If any part of this Release is deemed unenforceable, all other parts shall be given full force and effect.

In signing this agreement, I acknowledge and represent that I have read the foregoing "Waiver of Liability and Hold Harmless Agreement," understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written agreement, have been made; I am at least 18 years of age and fully competent; and I execute this Agreement for full, adequate and complete consideration fully intending to be bound by same.

Signature _____

Print Name _____

Date: _____

APPENDIX 1 - List of Sudbury Senior Center Volunteer Programs/Services

Fix-It Home Repair Volunteer Program
F.I.S.H. (Friends in Service Helping) Volunteer Program
Baked Goods Volunteer Program
Council on Aging
Friendly Visitor Volunteer Program
Phone Buddies Volunteer Program
Sand Bucket Delivery Volunteer Program
Leader/Moderator of class/program/presentation
Newsletter Collator
Special Events Helper
Grocery Shopping Volunteer Program
Soup's On Volunteer Program
Goodnow-to-Go Volunteer Program
Kitchen Helper
Home-Delivered Mid-Day Meal (Meals on Wheels) Driver
Intergenerational Projects (LINC)
SHINE Counselor
Medical Escort
Trip Coordinator
Special Projects
Support Group Leader
English Tutor
Leaf Removal
Legal Counseling
Audiologist
Technology Support
Tax Support
Administrative and/or Technical Assistance

APPENDIX 2 - COVID-19 Symptoms

People with COVID-19 have had a wide range of symptoms reported- ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus.

People with these symptoms may have COVID-19:

- Fever (100.4 or higher)
- Chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea