

Precautionary Coronavirus Liability Release Forum

Due to the 2019-2020 outbreak of the novel Coronavirus, COVID-19, there are extra precautions with client intake, health history review as well as sanitation and disinfecting practices. Please complete the following and sign below.

Symptoms of COVID-19 include:

Fever

Fatigue/malaise

Runny nose

Dry cough

Breathing difficulties

Terry Prowse

I, _____ agree to the following:

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I understand the above symptoms and affirm that I, as well as all household members and close contact associates, do not currently, nor have experienced the symptoms listed above or other cold/flu like symptoms within the last 14 days.

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I affirm that I, as well as all household members and close contact associates, have not been diagnosed with COVID-19 within the last 30 days.

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I affirm that I, as well as all household members and close contact associates, have not knowingly been exposed to anyone with COVID-19 within the last 30 days.

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I affirm that I, as well as all household members and close contact associates, have not travelled overseas or to any city/town outside our own that is considered a "hot spot" for COVID-19 infections within the last 30 days.

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I understand that this business and my massage therapist cannot be held liable for any exposure to the virus or any other contagion caused by my misinformation on this form or the health history by each client.

By signing below I agree to each above statement and release the massage therapist and business from any and all liability for the unintentional exposure or harm due to COVID-19 and other contagion.

Your massage therapist, Melanie King agrees that they abide by these same standards and affirm the same. The business also affirms that improved and expanded sanitation protocols to more thoroughly fight the spread of COVID-19 and other communicable conditions have been implemented.

Signature T. N. Prowse

Date 30/6/20