



# East Bay Iceland, Inc.



Dublin Iceland  
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## LIABILITY WAIVER (COVID-19)

I acknowledge the contagious nature of Coronavirus/COVID-19 and that the Centers for Disease Control and Prevention (CDC) as well as many public health authorities still recommend social (physical) distancing.

I further acknowledge that Dublin Iceland has put in place preventative measures to reduce the spread of Coronavirus/COVID-19. I also acknowledge that Dublin Iceland cannot guarantee that I will not become infected with Coronavirus/COVID-19. I understand the risk of becoming exposed to and/or infected by the Coronavirus/COVID-19 may result from the actions, omissions, or negligence of myself and others, including but not limited to, Dublin Iceland staff and Dublin Iceland patrons and their families.

I voluntarily seek the services provided by Dublin Iceland and acknowledge that I may be increasing my risk of exposure to the Coronavirus/COVID-19. I acknowledge that I must comply with all set procedures to reduce the spread of the virus while attending and/or participating in activities on and around the premises.

I attest that:

- I am not experiencing any symptoms of illness, such as but not limited to, coughing, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell.
- I have not travelled internationally within the last 14 days.
- I have not travelled to an area within the United States that is highly impacted by Coronavirus/COVID-19 within the last 14 days.
- To the best of my knowledge, I have not been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.
- I have not been diagnosed with Coronavirus/COVID-19 –OR– if a previous positive diagnosis, I have been cleared as non-contagious by state or local public health authorities.
- I am following all CDC recommended guidelines whenever possible and limiting my exposure to the Coronavirus/COVID-19.
- I will abide by all verbal and written instructions given to me by Dublin Iceland and their employees.
- I understand I will have my temperature taken with a thermal thermometer each time I enter Dublin Iceland.

I hereby release and agree to hold East Bay Iceland, Inc, Dublin Iceland, and all their officers and employees harmless from, and waive on behalf of myself, my heirs, and any personal representatives, any and all causes of action, claims, demands, damages, costs, expenses, and compensation for damage or loss to myself and/or my property that may be caused by an act or failure to act of Dublin Iceland. I understand that this release discharges East Bay Iceland, Inc, Dublin Iceland, and all their officers and employees from any liability or claim that I, my heirs, or any personal representatives, may have against the ice skating facility with respect to any bodily injury, illness, death, medical treatment, or property damage that may arise from, or in connection to, any services received from Dublin Iceland. This liability waiver extends to the ice skating facility together with all parties involved with managing and directing Dublin Iceland.

PRINT Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date: \_\_\_\_\_

Signature (parent/guardian if under 18 years old): \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_