

Notice for Attendees of DHI System Sessions and National DHIA Business Meeting

COVID-19 Liability Waiver and Assumption of Risk

This waiver must be signed and returned to National DHIA by all in person attendees.

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is reported to be extremely contagious. COVID-19 can cause serious and potentially life-threatening illness and even death. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing, proper mask wearing, getting fully vaccinated and have, in many locations, prohibited the congregation of groups of people.

National DHIA cannot prevent you from becoming exposed to, contracting, or spreading COVID-19 while attending its DHI System Sessions and National DHIA Annual Business Meeting on February 21 to 24, 2022 at Embassy Suites Riverwalk Hotel in San Antonio, TX. It is not possible to prevent against the presence of the disease. Therefore, National DHIA has coordinated so that anyone may attend and fully participate at the DHI System Sessions and National DHIA Annual Business Meeting virtually. In person attendance and participation is voluntary and not required. If you choose to attend the DHI System Sessions and the National DHIA Annual Business Meeting and/or any of the associated events in-person, you may be exposing yourself to and/or increasing your risk of contracting or spreading COVID-19.

ASSUMPTION OF RISK: I have read and understood the above warning concerning COVID-19. I hereby voluntarily choose to accept all foregoing risks of contracting COVID-19 for myself in order to attend the DHI System Sessions and National DHIA Annual Business Meeting in-person. I accept the risk of being exposed to, contracting, and/or spreading COVID-19. I accept sole responsibility for any injury to my myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claims, liability, or expense, of any kind, that I may experience or incur in connection with my in person attendance and participation at the Annual Meeting.

WAIVER OF LAWSUIT/LIABILITY: I hereby forever release and waive my right to bring suit against National DHIA and Quality Certification Services, their affiliates, and their respective owners, officers, directors, managers, officials, trustees, agents, employees, or other representatives in connection with exposure, infection, and/or spread of COVID-19 related to attending the DHI System Sessions and National DHIA Annual Business Meeting in person. I understand that this waiver means I give up my right to bring any claims including for personal injuries, death, disease, damages, costs or property losses, or any other loss, including but not limited to claims of negligence, and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

ADDITIONAL ACKNOWLEDGEMENTS:

1. In addition to the CDC guidelines, I agree to abide by any and all National DHIA policies or rules related to COVID-19 for in person attendance at DHI System Sessions or the National DHIA Annual Business Meeting, as well as all policies or rules related to COVID-19 of any facility or hotel where related events take place.

2. I agree not to attend the DHI System Sessions or the National DHIA Annual Business Meeting in person if I am experiencing any cold or flu-like symptoms (fever, cough, shortness of breath, etc.) or test positive for COVID-19 at any time within 10 days February 21 to 24, 2022.

3. I agree not to attend the DHI System Sessions or the National DHIA Annual Business Meeting in person if I have been in close contact with or cared for someone diagnosed with COVID-19 at any time within 10 days of February 21-24, 2022.

4. I agree that at any time during the DHI System Sessions or the National DHIA Annual Business Meeting, I will promptly notify National DHIA staff and leave all in person events if I develop any cold or flu-like symptoms (fever, cough, shortness of breath, etc.), test positive for COVID-19, or come in close contact with someone who I believe has COVID-19. I understand that I will not be refunded or reimbursed for any fees or expenses I have incurred to attend the DHI System Sessions or the National DHIA Annual Business Meeting.

I have read this COVID-19 Waiver and Assumption of Risk. I fully understand its terms, and have executed it knowingly, freely, and voluntarily without any inducement, duress or coercion, intending to be legally bound.

Printed Name

Signature

Date

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