



THE MASTER'S UNIVERSITY

COVID-19 COMPLIANCE AND ASSUMPTION OF RISK

COVID-19 Compliance. The novel coronavirus, COVID-19, is a highly infectious, potentially life-threatening disease declared by the World Health Organization to be a global pandemic. Individuals who may have been infected with COVID-19 may be asymptomatic for a period of time, or may never become symptomatic at all. Because of its highly contagious and sometimes “hidden” nature, it is currently very difficult to control the spread of COVID-19 or to determine whether, where, or how a specific individual may have been exposed to the disease. I understand that The Master’s University (“TMU”) has put into place safety rules and precautions in order to mitigate the spread of COVID-19, which rules and precautions may be updated at any time. While acknowledging that these rules and precautions may or may not be effective in mitigating the spread of COVID-19, I agree to comply with such rules and precautions which may include, but are not limited to, mask wearing, hand washing and sanitizing, self-evaluations and reporting, and social distancing. I understand that failing to comply with these rules and precautions is a violation of the TMU Student Code of Conduct and that failing to comply may subject me to sanctions, up to and including expulsion.

Health Checks. I understand and agree that personal responsibility will be critical to reduce the transmission of COVID-19 on campus. I agree that if I come in contact with someone that I learn has tested positive for COVID-19, or if I am exhibiting symptoms of acute respiratory illness, a fever of 100.4F or higher, chills, sore throat, persistent cough, loss of taste or smell or diarrhea, I will contact TMU Health Center for additional screening, and will remain isolated and self-quarantine until the symptoms subside and I have been fever-free for 24 hours without the use of medication. I also agree to follow any directives given by my personal physician or the TMU Health Center with respect to such an illness, although I acknowledge that TMU Health Center is not my doctor and is under no obligation to provide any advice.

Assumption of Risk. I acknowledge the contagious nature of COVID-19, that it is impossible to list each and every risk of contracting COVID-19, and that TMU cannot guarantee that I will not become infected with COVID-19. I understand that the risk of becoming exposed to or infected by COVID-19 at TMU may result from the actions, omissions, or negligence of myself and others, including, but not limited to, TMUS trustees, administrators, faculty, employees, agents, contractors, volunteers, and students. I understand that the use of personal protective equipment (“PPE”), including face masks, does not remove all risks of illness, nor does it make it inherently safe to return to campus. I alone have to determine the sufficiency of any PPE or other precautions that I decide to take to minimize the risks of returning to campus. I also acknowledge that I may be exposed to or infected by COVID-19 by attending TMU, and that such exposure or infection may result in personal injury, illness, permanent disability, and death. With full knowledge of the foregoing, I voluntarily assume the risk and responsibility associated with my exposure to COVID-19 in returning to the campus of TMU.

Severability: I agree that this Agreement is intended to be as broad and inclusive as permitted by law, and that if any portion is held invalid or unenforceable, the remaining portions will continue to have full legal force and effect.

Governing Law and Jurisdiction: This Agreement shall be governed by the laws of the State of California, and any disputes arising out of or in connection with this Agreement shall be under the exclusive jurisdiction of the Courts of the State of California.



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Acknowledgment of Understanding: I HAVE READ THIS COVID-19 COMPLIANCE AND ASSUMPTION OF RISK AND FULLY UNDERSTAND ITS TERMS AND AGREED TO BE BOUND THEREBY. I CONFIRM THAT I AM SIGNING THE AGREEMENT FREELY AND VOLUNTARILY AND INTEND MY SIGNATURE TO BE A COMPLETE AND UNCONDITIONAL ACCEPTANCE OF ALL RISK TO THE GREATEST EXTENT ALLOWED BY LAW.

My signature below indicates that I am at least eighteen (18) years of age and that I have read and understand the above statements and intend to be legally bound by its terms.

Name

Date

Signature

IF STUDENT IS UNDER THE AGE OF 18, THE UNDERSIGNED PARENT OR LEGAL GUARDIAN HEREBY AGREES THAT, HAVING READ AND FULLY UNDERSTANDING THE PROVISIONS OF THIS AGREEMENT, AND AGREEING TO BE LEGALLY BOUND BY ITS TERMS, I AM VOLUNTARILY ALLOWING MY CHILD, _____, TO ATTEND TMU AND PARTICIPATE IN ON CAMPUS CLASSES AND ACTIVITIES.

Name of Parent or Legal Guardian

Name of Parent or Legal Guardian

Signature

Signature

Date

Date