COVID-19 Release & Hold-Harmless Agreement

The current world-wide Coronavirus pandemic and government mandated "shelter in place" and "Donning masks when outside the home" orders in many communities underscore the risks associated for individuals leaving their own domains and going into the residences of our patients, agency offices, or any locations where assigned work may be conducted.

The undersigned understands that exposure to disease-causing organisms and objects, such as COVID-19 and personal contact with others, including but not limited to patients, primary caregivers and agency staff involves a certain degree of risk that could result in illness, permanent disability or death. The undersigned acknowledges this risk.

By signing this document, I agree to do the following:

- Complete agency staff daily screening tool prior to visit-this includes meeting at the agency office for temperature measurement.
- Complete fit test questionnaire
- Complete fit testing of n95 respirator
- Demonstrate proper donning and doffing of Personal Protective Equipment (PPE)
- Contact the volunteer coordinator to verify the results of patient COVID 19 screening prior to entry into patient's place of residence
- Follow the directives of the agency CD regarding the use of proper PPE prior to entering patient places of residence, agency office, or any locations where assigned work may be conducted.

After fully and carefully considering all potential risks involved, I hereby assume the same and agree to release and hold-harmless Colorado Palliative & Hospice Care, LLC and its employees, officers, agents, contractors and vendors from and against, all claims and liability resulting from exposure to disease-causing organisms and objects, such as COVID-19, associated with my volunteer work conducted in the agency office, patients' residence wherever the patient resides or locations where my work is to be conducted.

Printed Name	
Signature	Date