## LAMERS BUS LINES, INC. PASSENGER WAIVER AND RELEASE FORM

Trip/Eve		1308644	SLY	FOX	SKI	CLUB	JB 2/19/21	
Waiver and Release of Claims:								
Please re	ead this for caref	ully before signing.						
inherent r other inferesult of r and agree time; be p remain in due to tra accidents	risks of physical inj actious diseases, to my attendance of r that I and/or my to prevented from be vel restrictions; ar	ury/death/illness, incl participants of trips/i ny attendance of and family members may l ing present at school, or be unable ind I will be solely respons s can arise out of trip,	uding tevents, travel to subjusted a place to retonsible	the risk /activit to the a ect to e of em turn ho for an	of explications of explored and and and and and and and and and an	oosure to descript the potential to the	bove tri/event is completely voluntary, and there are e to or contracting of the coronavirus/ COVID-19 or ential additional coast associated therewith. As a event and the inherent risks, I recognize acknowledge or recommended self-quarantines for a period of or from working for a period of time; be required to e above-referenced trip/event for a period of time costs associated therewith. I understand that  Recognizing the risks, I herby agree to assume full	
	<ul> <li>Any risks, injuries, death, illness quarantine, or damage know or unknown which I and/or my family members might occur as a result of my participation in and travel to the trip/event, including but not limited to as a result of potential exposure to or contracting the coronavirus/COVID-19 or other infectious disease of injury.</li> </ul>							
	<ul> <li>Any additional costs or liabilities incurred as a result of me or my family members becoming ill, deceased, injured, or suffering a loss of wages, as a result of attending and traveling to the above-referenced trip/event, including but not limited to costs or liabilities associated with any mandatory or recommended quarantines; medical care/expenses; loss of employment or wages due to my own and/or my family member's physical injury/death/illness or inability to work or attend school; additional or loss of travel-related expenses incurred due to cancellations or itinerary changes travel restrictions, and/or quarantines.</li> </ul>							
In consideration for Lamers Bus Line providing me transportation to the trip/event, the sufficiency of which I acknowledge, I, on behalf of myself and my family members, expressly release, waive, discharge and covenant not to sue Lamers, its officers, agents, employees, representatives, and volunteers (collectively "Lamers") from any and all claims and for all loss, injury, or damage to myself and/or my family members, whether caused by the negligence of someone acting on behalf of Lamers or the negligence of someone else, arising out of my attendance of or travel to the above-reference trip/event. This waiver and release shall not absolve agents or employees of Lamers from liability or injury or damage caused by Lamers' intentional, willful or malicious conduct.								
		tand the above impor discuss this waiver an					nd waiver and release of claims. I also acknowledge I stative from Lamers.	
Please PRINT Passenger Name:								
Passenger	Signature (if 18 years	of age or older)						
Date:								
Please PRI	NT Parent/Guardian I	Name (if Passenger unde	r 18)					
Parent/Guardian Signature (if Passenger under 18):								