



explorelechlecha@gmail.com

## Explore ~ Lech Lecha Waiver Form

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

*Please read carefully and sign where indicated below:*

**I agree:**

- By signing this form, I hereby release and hold harmless **Explore ~ Lech Lecha**, its directors, officers, employees, contractors, agents, and representatives, from any and all damages, claims, injuries, and liabilities of whatever kind, including but not limited to claims for bodily injury or loss or damage to personal property, which may arise out of my retreat attendance and out of my participation in any activities while in attendance, including any illness, injuries, or other damages, claims or liabilities of any kind related to exposure to COVID-19. I acknowledge that this summer in particular an inherent risk of exposure to COVID-19 exists in any place where people are present, and voluntarily assume all risks related to exposure to COVID-19.

**I agree:**

- That I have active medical insurance throughout my stay at Explore ~ Lech Lecha.

**I give my permission for *Explore ~ Lech Lecha* to:**

- Have and use photographs, slides, videotapes or other media of my participation in Explore ~ Lech Lecha activities, for its records, public relations (i.e., brochures, website, newsletters, and presentations) or promotion of Explore ~ Lech Lecha.

**I understand and acknowledge that:**

- **Explore ~ Lech Lecha** reserves the right to make the determination when or if it may be necessary to have a participant withdrawn from the program and to withhold all fees should withdrawal be for purposes of maintaining the welfare or safety of other program participants.

**Signature:** \_\_\_\_\_

**Acknowledged and Agreed by:**

Explore ~ Lech Lecha, Inc.

Nadav Slovin

President