COVID-19 Acknowledgment for Penn State Programs

You agree that as a condition, and in consideration, of your willing and voluntary participation in programs and activities (“Program”) hosted by The Pennsylvania State University (“Penn State”):

1. You understand that Penn State has issued rules and precautions which follow, or may in some cases exceed, guidance from the Centers for Disease Control (CDC) and the Pennsylvania Department of Health. You agree that it is your sole responsibility to follow these protocols and acknowledge that failure to do so may result in removal from the Program.

   As of July 7, 2022, this guidance includes basic health, safety, and sanitation measures (staying home when sick, washing/sanitizing hands often, etc.) in addition to wearing a face mask while in healthcare facilities and certain research facilities and labs.

   Per CDC guidance, Penn State may impose additional or alternative requirements, including masking at certain locations, depending on community spread at the Program’s location. You agree to comply with any directive from Penn State representatives regarding masking or other mitigation measures while participating in the Program.

   You must adhere to these protocols regardless of vaccination status.

2. You agree you will not participate in the Program if you are awaiting the results of a COVID-19 test or if you recently: (i) have been diagnosed with COVID-19; (ii) have experienced any symptom of illness which may be associated with COVID-19; or, (iii) have been in close contact with anyone who has been diagnosed with COVID-19, is awaiting the results of a COVID-19 test, or has exhibited any symptom of illness which may be associated with COVID-19 or any of its variants.

   a. If you fall into any of the above categories, you may nevertheless participate in the Program if:
      i. more than five days have passed since your last close contact or symptom; AND,
      ii. you have tested negative for COVID-19 on or after the five-day mark.

3. You acknowledge the contagious nature of COVID-19 and your understanding that, even with adherence to all preventative measures, including vaccination, there is risk that you may become exposed to and/or contract COVID-19. You assume any and all risk of such exposure or infection and acknowledge that it may result in personal injury, illness, severe complications, permanent disability, and/or death.

   [SIGNATURES REQUIRED FOR MINORS – ON NEXT PAGE/REVERSE]
All minors (individuals under the age of 18) must print their names and a parent and/or legal guardian must sign, thereby certifying their guardianship and acknowledging the above, on their child’s behalf.

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Printed Name(s) of Guest(s) (under the age of 18):

Printed Name(s) of Parent/Guardian(s):

Signature(s) of Parent/Guardian(s):

Date: