

Caliente Community Chorus
Registration Form

Name _____
Address _____
City _____
State _____
Zip Code _____
Phone Number _____
Email Address _____
Birthday (month/day/year – optional) _____

Registration/Music Fee per semester \$50.00 (please make checks payable to **Caliente Choir**)

Caliente Community Chorus
P. O. Box 613
Blanco, New Mexico 87412

ACCIDENT AND HIGH RISK WAIVER/RELEASE OF LIABILITY

I, _____ (insert legal name) HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING AND/OR VOLUNTEERING IN THIS ACTIVITY AND ALL ASSOCIATED EVENTS, and do hereby waive, release and discharge Caliente Community Chorus, the school facility, the New Mexico Public School Insurance Authority, and their respective directors, board members, officers, volunteers, agents, representatives or assigns as well as all activity or event sponsors, from any and all liabilities of whatsoever nature or kind related to my participation in this activity.

I further agree to indemnify and hold Caliente Community Chorus, the school facility, the New Mexico Public School Insurance Authority, and their respective directors, board members, officers, employees, volunteers, agents, representatives or assigns as well as all activity or event sponsors, harmless from any and all claims or liabilities made or asserted as a result of my participation in any and all Caliente Community Chorus events or activities, whether attributable to or caused by the negligence or misconduct of any of the persons or parties listed above. Such indemnity shall include, but not be limited to, liabilities or claims arising from the negligence or fault of the listed entities, parties, or persons listed above for my death, personal injury, disability, theft of personal property, property damage, actions, or detriments of any nature or kind which may occur to me.

I recognize and acknowledge that participation in Caliente Community Choir activities includes a risk of exposure to COVID-19 and other communicable diseases, and **I am voluntarily choosing to participate in Caliente Community Chorus activities at my sole risk**. I agree to comply with the following best practices while engaging in Caliente Community Chorus activities:

1. If I have COVID-19 and/or general flu symptoms, I will stay at home and NOT attend any practices, performances or other Caliente Community Chorus activities until my symptoms cease, and/or I have confirmed that I have not contracted COVID-19.
2. If I am exposed to COVID-19 and have no symptoms, I can return to activities five (5) days after exposure unless I contract COVID-19 during such period which will then require guidance from my medical professional for timing of resumption of participation.
3. At this time masks are optional. If this changes I will follow guidelines as they are set forth.
4. I will use reasonable efforts in good faith to adhere to healthy guidelines like not sharing bottles or towels; frequent washing of hands; use of hand sanitizer; and avoiding touching my face.
5. I recognize that other members of the Caliente Community Chorus may be deemed to be high-risk for contracting COVID-19, and I will use reasonable and practicable efforts in good faith to minimize their exposure to COVID-19.

In the event that the State of New Mexico implements a new Public Health Order which could include guidelines, protocols and restrictions for mass gatherings and group activities, I hereby agree to follow the guidelines set forth.

I do also hereby grant to Caliente Community Chorus, its assigns, licensees, and legal representatives the sole and irrevocable right to use my name, image, likeness, picture, photograph, portrait, or video in all forms and media and in all manners, including composite for advertising, publication or any other lawful purpose without monetary compensation limited to such data as may be obtained during the time that I am participating in Caliente Community Chorus activities or events. I expressly waive the right to inspect or approve the product, whether preliminary or finished, including any written copy which may be created in connection therewith.

This **ACCIDENT AND HIGH RISK WAIVER/RELEASE OF LIABILITY** shall be construed broadly to provide a waiver and release to the maximum extent permissible under all applicable laws.

I certify that I have read this document in its entirety, and that I fully understand the terms, conditions, restrictions, provisions, guidelines and requirements set forth herein. I acknowledge that this a contract granting and assigning certain rights and privileges and my signature hereto constitutes my full and complete consent to this contract of my own free will and volition.

Printed Name: _____

Executed this _____ day of _____, 2022.

Signature: _____

Executed this _____ day of _____, 2023.

Signature: _____