RELEASE FROM LIABILITY AND INDEMNITY AGREEMENT

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I wish to assist the Town of Milton Health Department in responding to the threat presented by the 2019 Novel Coronavirus (COVID-19) pandemic. This activity (the Activity) would include, without limitation, requesting information from individuals who have tested positive for COVID-19, identifying persons who have had close contact with those COVID-19 cases, obtaining contact information for those persons, and obtaining from such persons information about their contact with COVID-19 cases and any symptoms they are experiencing.

My participation in the Activity is voluntary. I hereby forever release, indemnify and hold harmless the Town of Milton and all of its officers, employees, boards, commissions and committees, including without limitation the Milton Board of Health, the Milton Health Director, employees in the Milton Health Department, and the Milton Select Board, from all claims, causes of action, costs damages and liability of any kind, including without limitation death, personal injury, property damage and attorney’s fees, which I now have or hereafter may have, on account of, or in any way arising out of, directly or indirectly, of my participation in the Activity.

This document is limited to claims for ordinary negligence and shall not apply to claims for gross negligence or intentional or reckless conduct.

I have read this document, I understand its contents, and I sign it of my own free will. I have had the opportunity to review this document with an attorney of my choice.

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Printed Name of Witness Printed Name

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Signature of Witness Signature

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Date Date