

I fully understand and acknowledge that I:

1. Acknowledging and attesting this for myself and for any members of the family attending the HKK Ugadi event hosted by Hoysala Kannada Koota at Vallabhdham Temple 26 Church Street Newington CT.
2. I will check for any symptom of illness such as cough, shortness of breath or difficulty breathing, fever, chills, repeated shaking with chills, muscle pain, headache, sore throat, or new loss of taste or smell – within 5 hours of attending the Ugadi event. If I have any symptoms, we will follow the recommended CDC guidelines for attending any such events.
3. If I am exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19 in the 5 days before attending the Ugadi event, I will follow the recommended CDC guidelines for attending any such events.
4. I will be following all general CDC recommended guidelines and any state and local COVID 19 guidelines to protect myself and others from Coronavirus/COVID-19.
5. I am fully vaccinated as per the CDC guidelines and any exceptions are explainable.
6. The events have inherent food allergies risks, and that my participation events may result in allergies, injury, illness or death. I assume full responsibility for any allergies, injuries or damages resulting from my participation in this event I hereby release the Vaishnav Parivar of CT (Vallabhdham Temple) and Hoysala Kannada Koota of CT and each of its present and former owners, trustees, board members, volunteers, devotees and employees from any and all liability for damage, losses, personal allergies, injury and illness to myself resulting from my participation in event.

Please sign and print your name below to release liability. Thank you.

Signature _____

Printed Name _____ Date _____