



ISP Spiritual Reflection COVID-19 Health Waiver

First & Last Name

Date

I attest that I have been **fully vaccinated for the COVID-19 virus*** and I am able to present proof of vaccination upon request. Yes _____ No _____

I agree to wear a **face mask** over my nose and mouth at all times during this ISP spiritual reflection session. Yes _____ No _____

I agree to maintain an **appropriate amount of distance** (3-6ft.) from others in the group during this ISP spiritual reflection. Yes _____ No _____

***Fully vaccinated is defined as having received an approved COVID-19 vaccine (Pfizer, Moderna, or Johnson & Johnson) 14 days or more prior to the beginning of the ISP retreat.**

I, the undersigned, request voluntary participation in this spiritual reflection sponsored by the Ignatian Spirituality Project (ISP). I consent to participation in this spiritual reflection and voluntarily and willingly assume responsibility for all risks and dangers associated with my participation. I agree to be responsible financially for any losses resulting from my actions and will indemnify ISP from any loss or damage caused by myself during this spiritual reflection. In consideration of this, I hereby waive all claims and causes of action against ISP, and its directors, employees and volunteers, and hereby hold harmless these individuals from all liability except such loss or damage which was caused by the sole negligence or willful misconduct by the aforementioned.

I agree that pictures or video of me may be taken in connection with my participation during this spiritual reflection without compensation from ISP and consent to the use of these pictures or video for any legal purpose. I am also fully aware that what I voluntarily share during this retreat will be held in confidence, except that which may indicate physical harm to myself or others, or is required by law to report to the appropriate authorities.

I have read this ISP Spiritual Reflection Covid 19 Health Waiver and understand the terms used in it and their significance.

Signature

Phone Number