

**PLEASANT CREEK TRAIL RUN COVID-19 PROTOCOL AND WAIVER  
ALL RUNNERS AND VOLUNTEERS MUST READ AND AGREE TO BE ALLOWED TO PARTICIPATE**

**WAIVER – PLEASE READ**

I acknowledge the contagious nature of COVID-19 and other communicable diseases and voluntarily assume the risk that I may be exposed to or infected by COVID-19 and/or other communicable diseases by participating in the Pleasant Creek Trail Run.

I acknowledge that such exposure of infection may result in personal injury, illness, or permanent disability, and/or death. I understand that the risk of becoming exposed to or infected by COVID-19 is in connection with my participation in any race-related activities, and personally assume this risk.

I certify that, to the best of my knowledge, I have not had symptoms commonly associated with COVID-19 (fever/chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste/smell, sore throat, congestion or running nose, nausea or vomiting, diarrhea) in the past fourteen (14) days, nor have I been directly exposed to an individual contagious with COVID-19 in the past fourteen (14) days or who is awaiting test results.

I agree that I will notify the race directors of the Pleasant Creek Trail Run if I develop symptoms or am exposed between the time of my signing this waiver and my arrival at the race event.

I agree that, if I develop clear symptoms and/or receive a positive test for COVID-19 in the fourteen (14) days after the event, I will notify the race directors of the Pleasant Creek Trail Run. I understand my personal information will be kept confidential, and CDC guidelines for contact tracing and notification will be followed.

I agree to follow the race-specific safety protocols as specified in the [Pleasant Creek Trail Run Participant Packet](#) and/or any subsequent updates that will be communicated to me by the race directors via email, website and/or in-person communication. I understand that those not cooperating with the protocols will be asked to leave, and that runners could be subject to disqualification if they themselves or their associated crew/family/friends fail to follow these protocols.

**PLEASE FILL OUT THE INFORMATION BELOW, SIGN AND DATE**

<b>I AM A:</b>	RUNNER <input type="checkbox"/>	VOLUNTEER <input type="checkbox"/>
<b>PHONE NUMBER:</b>		
<b>EMAIL:</b>		
<b>PRINTED NAME:</b>		
<b>SIGNATURE:</b>		
<b>DATE</b>		