



Informed Consent & Wavier

I, _____, am the parent and/or legal guardian of _____, a minor child.

I acknowledge and understand that the Glebe House Museum & Gertrude Jekyll Garden, its Board of Directors, Agents, and Employees is/are committed to the exercise of due and reasonable care in the prevention and/or transmission of viral and bacterial illnesses, including but not limited to Coronavirus/Covid19. However, the Glebe House Museum & Gertrude Jekyll Garden cannot and does not guarantee that students/participants and/or anyone they come in contact with, will not contract and/or transmit any particular viral or bacterial illness from or as a result of participation in Glebe House Museum & Garden programs and/or activities. I also acknowledge and understand there is an incalculable degree of risk of contracting and/or transmitting viral and/or bacterial illness(es) that is inherent to participation in Glebe House Museum & Garden programs and activities; and I accept and assume that risk knowingly, intelligently and voluntarily.

I, therefore, covenant agree that neither I nor my child shall have any cause of action or make any claim or demand against the Glebe House Museum & Gertrude Jekyll Garden, its Board of Directors, Agents, and Employees based upon, arising from or related to the contraction or transmission of Coronavirus/Covid19 or other viral or bacterial illness(es); and shall hold the Glebe House Museum & Gertrude Jekyll Garden, its Board of Directors, Agents and Employees harmless and indemnified from all liability and/or damages caused by; arising from or related to the same.

Parent / Guardian

Date