



COVID-19 RELEASE FORM

The following are terms and conditions due to the present and ongoing COVID-19 pandemic in Uganda:

I understand that COVID-19 testing and vaccination requirements are at the directive of government guidelines of the U.S. and Uganda and are subject to change in the weeks and days leading up to my trip; and therefore that Musana and its participants must abide by these policies in order to participate in international travel.

- I will receive the necessary testing prior to my departure date to Uganda.
- I will receive the necessary testing prior to my return date to the U.S.
- I understand that costs associated with testing will be included in my trip costs.
- I understand that I may also be required to get a COVID-19 vaccine prior to travel if it becomes required for entry into Uganda, and that this cost is my own.
- I understand that should testing and vaccination requirements by either government change prior to my departure, and I am no longer willing to abide by them, that this will immediately disqualify me from participating in the trip. In this case I understand that I will not receive any partial or full refund or reimbursement for my trip because I am voluntarily forfeiting my ability to participate.

I will do everything in my power to protect myself from contracting COVID-19 14 days prior to my departure and while in Uganda, including:

- Regular hygiene and hand-washing
- Wearing a mask and social distancing when Musana staff deems necessary
- Avoiding large gatherings
- Should I have any questions about how to conduct myself, I will consult the CDC's most current guidelines/ recommendations AND consult with my Musana team leader

I also fully and completely release Musana from all and any liability or responsibility related to COVID-19, understanding that it is currently an inherent risk of international travel. If I contract COVID-19 at any point during my travel with Musana, I understand that I will be required to quarantine for 10-14 days and that this will most likely extend my time in Uganda. I understand that any costs associated with my in-country care for a COVID-19 diagnosis will be my own and that Musana is not the responsible financial party. This includes, but is not limited to: doctor or hospital visits, continued testing, medications, lodging, food, transportation, and other related costs. I understand that any cancellations or changes to my trip and/or its duration due to COVID-19 will not result in any full or partial refund of my trip.

By signing below, I am stating that I thoroughly understand this agreement and am agreeing to fully comply with the procedures, recommendations, and policies stated above.

Participant's Printed Name: _____

Participant's Signature: _____ Date: _____

(If under 18, parent or legal guardian must sign)

Parent/Legal Guardian Signature: _____ Date: _____