COVID-19 HEALTH AND SAFETY LIABILITY WAIVER

By registering to attend the in-person Frontiers of Artificial Intelligence in Radiation Oncology and Medical Imaging ("Event") specialty meeting, you expressly agree to adhere to all COVID-19 protocols implemented by the American Association of Physicists in Medicine ("AAPM"), any facilities or venues at which the Event is to be held, or any third-party organizations providing services, recreation, or entertainment at the Event. Agreement by you to comply with applicable COVID-19 protocols is a condition of your in-person attendance at the Event.

- All in-person attendees, including and not limited to speakers, moderators, guests, exhibitors and service providers, must show proof of completed vaccination (Click here for a complete list ») to pick up their badges and attend the Event.
- Masks will be required for all indoor activities during the Event.
- Meals will be planned closer to the Event date with a particular focus on the safety of all attendees.
- There is currently no cap on the total number of people who may attend the Event.
- Meeting rooms will be set in ways to maximize personal space.
- in-person attendees must indicate their understanding and agreement to the COVID-19 requirements outlined in this waiver and release of liability while registering for the Event and possibly again before the start of the Event.

Please note that these guidelines may change as the Event date approaches, based on local and CDC guideline changes. Please always refer to the CDC COVID-19 website as well as Santa Clara County Public Health Orders, The City of Palo Alto Coronavirus (COVID-19) Information, and Stanford University COVID-19 Resources for the most up-to-date information.

COVID-19 SAFETY INFORMATION

While participating in the in-person Event, or any AAPM function:

1. Only fully vaccinated individuals are permitted to attend in-person; and,
2. All in-person attendees will be required to wear masks indoors to reduce the risks of exposure to COVID-19, pursuant to the current Santa Clara County Order.

Because COVID-19 is highly contagious and spreads mainly from person-to-person contact, AAPM has put in place preventative measures to reduce the spread of COVID-19. However, AAPM cannot guarantee that Event participants or others in attendance will not become infected with COVID-19. Considering the current infection rate of COVID-19, individuals who fall within any of the categories below should not participate in-person in the Event and other face-to-face AAPM functions.

By attending the Event, you certify that you do not fall into any of the following categories:

1. Individuals who currently or within the past fourteen (14) days have experienced any symptoms associated with COVID-19, which include fever, cough, and shortness of breath, among others.
2. Individuals who believe that they may have been exposed to a confirmed or suspected case of COVID-19 or have been diagnosed with COVID-19 and are not yet cleared as non-contagious by state or local public health authorities or the health care team responsible for their treatment.
DUTY TO SELF-MONITOR
Participants agree to self-monitor for signs and symptoms of COVID-19 (symptoms typically include fever, cough, and shortness of breath) and will contact Mariana Gallo, AAPM Director of Meetings and Programs, if they experience symptoms of COVID-19, within 14 days after participating at the Event.

MEDICAL ACKNOWLEDGMENT
I acknowledge the health risks associated with the activity of participating in the Event as outlined on the CDC COVID-19 website. I agree that if I experience any of these or any other symptoms during the Event, I will discontinue my participation immediately and seek appropriate medical attention.

ASSUMPTION OF THE RISK
I acknowledge and understand the following:

1. Participation includes possible exposure to and illness from infectious diseases, including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of severe illness and death does exist.
2. I knowingly and freely assume all such risks related to illness and infectious diseases, such as COVID-19, even if arising from the negligence or fault of the Released Parties; and,
3. I hereby knowingly assume the risk of injury, harm, and loss associated with the Event, including any injury, harm, and loss caused by the negligence, fault, or conduct of any kind on the part of the Released Parties as defined below.

RELEASE AND WAIVER
I HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE ANY AND ALL LIABILITY, CLAIMS, AND DEMANDS OF WHATEVER KIND OR NATURE AGAINST THE AMERICAN ASSOCIATION OF PHYSICISTS IN MEDICINE AND ITS AFFILIATES AND SPONSORS, INCLUDING IN EACH CASE, WITHOUT LIMITATION, THEIR DIRECTORS, OFFICERS, EMPLOYEES, AND AGENTS (THE "RELEASED PARTIES"), EITHER IN LAW OR IN EQUITY, TO THE FULLEST EXTENT PERMISSIBLE BY LAW, INCLUDING BUT NOT LIMITED TO DAMAGES OR LOSSES CAUSED BY THE NEGLIGENCE, FAULT OR CONDUCT OF ANY KIND ON THE PART OF THE RELEASED PARTIES, INCLUDING BUT NOT LIMITED TO DEATH, BODILY INJURY, ILLNESS, ECONOMIC LOSS OR OUT OF POCKET EXPENSES, OR LOSS OR DAMAGE TO PROPERTY, WHICH I, MY HEIRS, ASSIGNEES, NEXT OF KIN AND/OR LEGALLY APPOINTED OR DESIGNATED REPRESENTATIVES, MAY HAVE OR WHICH MAY HEREAFTER ACCRUE ON MY BEHALF, WHICH ARISE OR MAY HEREAFTER ARISE FROM MY PARTICIPATION AT THE EVENT.

By clicking to register for this in-person Event, I acknowledge and agree that I understand the contagious nature of COVID-19. I voluntarily assume the risk that I, my children, or anyone for whose health I may be responsible may become infected, exposed, or otherwise contract COVID-19 because of participating in the Event. I fully understand the terms and understand that I have given up certain rights by registering for this in-person Event and do so freely and voluntarily.