Assumption of Risk and Waiver of Claims

The American Academy of Hospice and Palliative Medicine and Hospice and Palliative Nursing Association 2022 Annual Assembly ("Conference") will take place February 9-12, 2022, at the Music City Center in Nashville, TN ("Venue"). Those choosing to attend the Conference in person must agree to the terms of this Assumption of Risk and Waiver of Claims ("Waiver").

By signing this Waiver, the undersigned ("I") makes the decision to attend the Conference in person with the full understanding of the inherent risks of such decision and acknowledges and agrees as follows:

- COVID-19 is an ongoing extremely contagious worldwide pandemic.
- Infection with COVID-19 infection can result from close proximity to others, person-to-person contact, exposure to droplets/aerosols released by other attendees as a result of breathing, coughing, talking and normal interaction as well as by touching surfaces.
- By traveling to and/or attending the Conference, I risk becoming exposed to or infected with COVID-19 as a result of my actions, omissions, or negligence, or those of other attendees or participants, including without limitation, AAHPM and HPNA officers, directors, members, agents, and staff.
- Contracting COVID-19 can result in personal injury, illness, permanent disability, and death. Risk increases steadily with age, and persons with underlying medical conditions are considered to be at "high risk" and particularly susceptible to developing severe illness from COVID-19.
- AAHPM and HPNA cannot guarantee that I will not become infected with COVID-19 during the Conference.
- Attending the Conference could increase my risk of contracting COVID-19.
- AAHPM and HPNA is not responsible for the Venue’s COVID-19 mitigation efforts (or lack thereof) or any negligence by the Venue or its staff relative to such precautions.
- AAHPM and HPNA reserves the right to, at any time, and at our sole discretion, modify these terms and conditions. Any such modification will be effective immediately upon public posting. Your conference registration following any such modification constitutes your acceptance of these modified Terms.

To help minimize the potential for COVID-19 transmission, everyone attending the Conference (including any guests that accompany me) shall

- **Prepare your proof of vaccination.** Proof of full vaccination is required for all in-person meeting attendees, exhibitors, and staff. You must verify that you are fully vaccinated with a WHO-approved vaccine (i.e. Pfizer, Moderna, Johnson and Johnson). According to the CDC, you are considered fully vaccinated two weeks after your final dose. Additional details for submitting your proof of vaccination through a third party vendor to come.
- **Check travel guidelines.** Check the requirements for airline and for the destinations you will be traveling. Review the latest TSA COVID-19 updates and mask requirements during flight travel.
- **Complete the self-assessment.** If you have any symptoms, we ask that you please stay at home. Check your symptoms using the CDC’s COVID-19 Self-Checker.--Neither my guests nor I will not attend the Conference in person if we have experienced any of the following symptoms within the fourteen (14) days immediately prior to the Conference: fever or chills; cough; shortness of breath or difficulty breathing; fatigue; muscle or body aches; headache; sore throat; new loss of taste or smell; congestion or runny nose; nausea or vomiting; or diarrhea.
- **Pack Your Mask.** Currently, it will be required that you wear a mask at all indoor public places affiliated with the Annual Assembly, regardless of vaccination status.
- **Updates.** Continue to check annualassembly.org for more information and updates regarding planning and requirements.

I acknowledge and agree that it is my obligation to follow all recommended health and safety measures while attending the Conference, including, but not limited to, Centers for Disease Control (CDC) guidelines, as well as
statutes, regulations, and other mandates applicable in the locale of the Conference (collectively, “Guidance”). I understand that the Guidance will continue to evolve over time, but, at a minimum, my guests and I will:

(i) Avoid person-to-person contact such as handshakes, high-fives, hugs, or kisses;
(ii) Maintain a minimum distance of six feet from others in order to allow for “physical distancing”, when available;
(iii) Wear a face mask or covering, except in limited settings outdoors or where social distancing can otherwise be maintained; and
(iv) Wash my hands frequently throughout the day for at least 20 seconds or use hand sanitizer if hand washing is not readily available.

I understand that my failure to comply with all safety protocol procedures as listed above or any direction from AAHPM or HPNA staff on site may result in the loss of my right to attend or participate in the Conference, including forfeiture of any registration fees paid.

I acknowledge and agree that I am attending the Conference voluntarily, and at my own risk. I hereby release, for myself, my heirs, assigns, personal representatives and next of kin, and do forever discharge, indemnify and hold harmless AAHPM and HPNA, its directors, officers, staff, agents, members, and representatives, of and from any and all claims, liabilities, actions, damages, costs or expenses of any kind arising out of, in connection with, or relating to my attending or participating in the Conference including, without limitation, any illness, damages, or injury whatsoever resulting from my travel to and from, and attendance at, the Conference, participation in events related to the Conference, exposure to an infectious disease (including COVID-19) or the manner in which the Conference or its related events and activities are conducted (collectively, “Claims”). I understand and agree that this Waiver includes, without limitation, any Claims based on the actions, errors, omissions, or negligence of AAHPM and HPNA, its directors, officers, staff, agents, members, and representatives, whether a condition giving rise to any Claims occurred before, during, or after I attended or participated in the Conference.

I understand that AAHPM and HPNA is under no obligation to provide medical aid in case of accident or illness during the Conference. However, should accident or illness occur, I give AAHPM and HPNA (its representatives or staff) permission to seek immediate medical aid, and I further agree to hold harmless AAHPM and HPNA and its respective officers, directors, staff, agents, members, and representatives from any liability for illness, death, injury, loss or damage related in any way to the provision, or lack of provision, of medical aid.

By checking the box in the registration workflow, or giving my consent via email or survey link, I affirm I have carefully read this Waiver, understand its terms and conditions, and agree, for myself and any guests that accompany me to the Venue, to be bound by all terms and conditions.