Waiver, Release And Hold Harmless Agreement

 Do you have any cold or flu-like symptoms, including cough, shortness of breath, fever, chills, and/or no sense of smell or taste? Have you had exposure to a confirmed positive case of COVID-19 within the past month?
If you answer yes to any of these questions, you will need to re-schedule your appointment.
In light of the COVID-19 pandemic, we, Jules & Zoa salon, understand the risks, dangers, possible injuries and losses involved in providing hair and skincare services (the "Activity") at our Olathe, KS location.
In consideration of receiving hair and skincare services from Jules & Zoa salon, I (together with my parent or guardian, if I am under the age of eighteen (18) or under a legal disability) represent, covenant and agree, on behalf of myself and my heirs, assigns, and any other person claiming by, under or through me, as follows:
 I acknowledge that participating in the Activity involves certain risks (some of which I may not fully appreciate) and that injuries, death, property damage or other harm could occur to me or others. I accept and voluntarily incur all COVID-19 related risks of any injuries, damages, or harm which arise during or result from my participation in the Activity, I waive all claims against Jules & Zoa salon and its employees ("Released Parties") for any COVID19 related injuries, damages, losses or claims, whether known and unknown, which arise during or result from my participation in the Activity, regardless of whether or not caused in whole or part by the negligence or other fault of Released Parties. I release and forever discharge the Released Parties from all such claims. I agree to indemnify and hold the Released Parties harmless from all losses, liabilities, damages, costs or expenses (including but not limited to reasonable attorneys' fees and other litigation costs and expenses) incurred by any of the Released Parties as a result of any claims or suits that I (or anyone claiming by, under or through me) may bring against any of the Released Parties to recover any losses, liabilities, costs, damages, or expenses which arise as a result of COVID-19 during or result from my participation in the Activity, regardless of whether or not caused in whole or part by the negligence or other fault of any of the Released Parties. I have carefully read and reviewed this Waiver, Release And Hold Harmless Agreement. I understand it fully and I execute it voluntarily.
EXECUTED thisday of, 20
Participant Signature Participant Printed Name

Parent/Guardian Name

Parent/Guardian Signature