



COVID-19 ACKNOWLEDGEMENT, WAIVER AND RELEASE

To comply with public health best practices during the COVID-19 outbreak and aftermath, we respectfully ask that by signing below, you acknowledge and agree that you, the occupants of your guestroom(s) and any of your invited visitor(s) to our property (collectively, the “Guests”) **are fully aware of the symptoms of COVID-19¹ and confirm that none of the Guests are experiencing any such symptoms, nor do any of the Guests have reason to suspect that they have been exposed to COVID-19 within the past 14 days. Additionally, you fully understand that Uptown Suites cannot guaranty that its property or its employees are free of the COVID-19 virus.**

We are asking that our valued guests and visitors, including the Guests, follow all recommended CDC guidelines relating to COVID-19. We are all responsible for practicing the preventative steps recommended by the CDC and your thoughtful attention to these guidelines is needed to help prevent the spread of COVID-19.

In connection with your stay at our property, we are requiring the acknowledgement and consent to the following terms:

I, on my own behalf and on behalf of the other Guests, acknowledge that the Guests fully understand that COVID-19 is highly contagious, and that although Uptown Suites is taking reasonable efforts to mitigate contamination risks, all risk of exposure cannot be fully eliminated. As such, the Guests are assuming the inherent risk of exposure to COVID-19 by visiting and/or staying at our property or any other place of public accommodation. In consideration of the use of the guestroom and/or other Uptown Suites’ facilities and services, the Guests hereby waive and release the property owner, property manager and each of their respective affiliates, subsidiaries and employees from any and all claims, liabilities, damages, actions or costs directly or indirectly arising from or in connection with potential or actual exposure to COVID-19 at our property or any of other Uptown Suites’ facilities (or at any medical facility or testing center visited subsequently) including, but not limited to, any illness, injury, loss of work, loss of wages, trauma, emotional distress, medical expenses or death suffered in connection therewith. By signing below, I acknowledge, on my behalf and on behalf of the other Guests, that I have informed all Guests of these terms, that the Guests fully understand the waiver set forth above, and that each of the Guests fully accepts all risk of exposure to COVID-19 in connection with visiting or staying at our property.

Print Name: _____

Signature: _____

Date: _____

For more information on COVID-19, please visit the CDC guidelines at:

<https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

¹ COVID-19 symptoms may include, among other symptoms, fever, tiredness, dry cough, aches and pains, nasal congestion, runny nose and sore throat.