**COVID Vaccine**

**Release Agreement**

In consideration of the acceptance of a COVID vaccination, I hereby waive, release, and discharge any and all claims for damages for death, personal injury, or property damage which I may have, or which hereafter accrue to me, against the Entity as a result of my receiving the vaccination.

This release is intended to discharge [insert entity name], its officers, officials, employees, and volunteers, any other involved municipalities or public agencies from and against any and all liability arising out of or connected in any way with my receiving the vaccination, even though that liability may arise out of the negligence or carelessness on the part of persons or Entities mentioned above.

I further understand that accidents and injuries can arise out of receiving the vaccination; knowing the risks, nevertheless, I hereby agree to assume those risks and to release and to hold harmless all of the persons or agencies mentioned above who (through negligence or carelessness) might otherwise be liable to me (or my heirs or assigns) for damages. It is further understood and agreed that this waiver, release, and assumption of risk is to be binding on my heirs and assigns.

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_