



YOUTH & FAMILY SERVICES

970.668.9183 ph | 970.668.9188 f
www.SummitCountyCO.gov

360 Peak One Dr., Ste. 210 | PO Box 4326
Frisco, CO 80443

COVID 19 SPECIAL PERMISSION

Participants utilizing ‘The Drop Teen Center’ must abide by all **current** State and local public health orders in order to ensure continued safety and community health.

Participants must:

1. Use of a mask at all times. If you do not own a mask, one will be provided for you.
2. Maintaining a space of 6 feet from all other Participants at all times.
3. Gatherings of fewer than 10 people.
4. Attend ‘The Drop Teen Center’ only if Participant is **not** experiencing fever, aches, pains, sore throat, cough, or is otherwise not in good health.
5. These precautions are subject to change at any time.

I _____, (“Participant”) agree to release, waive, discharge and covenant not to sue the County for any injuries, illness, or damages sustained by the Participant. I further agree to assume all risks associated with Participant’s participation in ‘The Drop Teen Center.’ I agree to indemnify, defend and hold harmless the County, both collectively and individually, in addition to its respective agents, elected officials, officers, directors, owners, contractors, volunteers, and other employees (collectively the “Released Parties”), from any and all liability actions, causes of actions, debts, claims and demands of every kind and nature whatsoever which may arise during the course of as a result of the Participants attendance at ‘The Drop Teen Center.’

Participant Signature _____ Date _____

Parent/Guardian Signature _____ Date _____
(if Participant is under 18 years of age)

Parent phone or email _____

Naaila Ahmad
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Youth and Family Services
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