

COVID-19 ASSUMPTION OF RISK, WAIVER AND COMPLIANCE COMMITMENT FORM

ASTRO 2021 ANNUAL MEETING

COVID-19 ASSUMPTION OF RISK, WAIVER AND COMPLIANCE COMMITMENT FORM

COVID-19 Assumption of Risk, Waiver and Compliance Commitment

I am aware of the inherent risk of exposure to the COVID-19 virus involved in attending the in person 2021 ASTRO Annual Meeting and that COVID-19 is a highly contagious disease that can lead to severe illness and death. To the extent that I attend the in-person event, I agree to honor the Personal Accountability Commitment stated below and to follow all instructions contained in the [Attendee Policies](#), the [Health and Safety Protocols and Measures](#), and for exhibitors the [Exhibitor Booth Health and Safety Guidelines](#), as well as any posted instructions and signage while attending the ASTRO meeting and events. I voluntarily assume all risks related to exposure to COVID-19 when attending ASTRO meetings and events and WAIVE LIABILITY AGAINST ASTRO, ITS OFFICERS, DIRECTORS, EMPLOYEES, AGENTS, CONTRACTORS AND VOLUNTEERS FOR ANY LOSS, DAMAGES, OR SUFFERING RELATED TO EXPOSURE TO COVID-19.

Personal Accountability Commitment

I agree to abide by and engage in appropriate health and safety conduct as specified by ASTRO while attending the Event. This includes, but is not limited to not attending the 2021 ASTRO Annual Meeting if I am ill or have recently been exposed to COVID-19, providing required attestations regarding COVID-19 vaccination or testing, complying with mask mandates, engaging in physical distancing, exercising hand hygiene and respiratory etiquette, and otherwise adhering to the [Attendee Policies](#), [Health and Safety Protocols and Measures](#), [Exhibitor Booth Health and Safety Guidelines](#) (for exhibitors), posted signs and verbal requests.

ACKNOWLEDGEMENT (REQUIRED)

PRINT NAME

ORGANIZATION

EMAIL

SIGNATURE

DATE

Registered Spouse/Guest Information (REQUIRED IF APPLICABLE)

If you are a registered Spouse/Guest of a Full Conference Attendee, please indicate the Full Conference Attendee you are Spouse/Guest of:

FULL CONFERENCE ATTENDEE'S FULL NAME

FULL CONFERENCE ATTENDEE'S ORGANIZATION

FULL CONFERENCE ATTENDEE'S EMAIL