

JDC PROGRAMS GENERAL LIABILITY RELEASE AND PRE-TRIP ADVISORY

I, (the "Participant"), hereby confirm my desire to participate in JDC Entwine's Global Speakeasy Event in Washington, DC (the "Program") organized by the American Jewish Joint Distribution Committee, Inc. and/or any JDC-related party ("JDC").

As a condition of my participation in the Program, I agree to the following terms, policies and all rules and regulations of the Program. I am aware that these rules, regulations, policies and programs may be changed at any time and will, as changed, be binding on me. JDC will notify me in the event of any significant material modifications to these, and I acknowledge that my participation in the Program will be considered an acceptance of any such modifications. I understand that I will be bound by the terms and conditions set forth herein.

Code of Conduct. I agree to abide and be bound by JDC rules and regulations for the conduct of Participants in the Program, particularly those relating to security and personal safety, including, without limitation, those stated here. I agree to fully cooperate with all JDC and any JDC-partner staff. I agree to respect the property and privacy of others under all circumstances, and to fully adhere to JDC's security guidelines. I further agree that if, at any time, a JDC-authorized staff member should determine, in their sole and absolute discretion, that my conduct fails to comply with JDC rules and regulations for the conduct of participants in the Program, or that my conduct has discredited the status or reputation of JDC, I will leave the Program when directed to do so by JDC at my own expense.

COVID-19 Statement. I represent and warrant that to the best of my knowledge, I am not infected with nor exhibiting symptoms of COVID-19. I further represent and warrant that I will not participate in the Program if, at the time the Program, I (1) am infected with COVID-19, (2) am experiencing symptoms of COVID-19, (3) have been advised by a medical professional that I am at risk for severe disease related to COVID-19, or (4) am subject to a quarantine order issued by any governmental or public health official.

COVID-19 Assumption of Risks. I understand that JDC is not responsible in any manner for any risks related to COVID-19 in connection with the Program. I understand that the World Health Organization has classified the COVID-19 outbreak as a pandemic and that at the time of this Program, the Program may involve travel to a destination identified by relevant governments as a high-risk travel destination or a destination to which travel should be avoided or postponed. I further understand that COVID-19 is a highly contagious and dangerous disease, and that contact with the virus that causes COVID-19 may result in significant personal injury or death. I am fully aware that participation in the Program (including any related travel) carries with it certain inherent risks related to COVID-19 transmission ("Inherent Risks") that cannot be eliminated regardless of the care taken to avoid such risks. Inherent Risks may include, but are not limited to, (1) the risk of coming into close contact with individuals or objects that may be carrying COVID-19; (2) the risk of transmitting or contracting COVID-19, directly or indirectly, to or from other individuals including upon return from any travel; and (3) injuries and complications ranging in severity from minor to catastrophic, including death, resulting directly or indirectly from COVID-19 or the treatment thereof. Further, I understand that the risks of COVID-19 are not fully understood, and that contact with, or transmission of, COVID-19 may result in risks including but not limited to loss, personal injury, sickness, death, damage, and expense, the exact nature of which are not currently ascertainable, and all of which are to be considered Inherent Risks. I hereby voluntarily accept and assume all risk of loss, personal injury, sickness, death, damage, and expense arising from all such risks related to COVID-19. Furthermore, I undertake to comply with any and all COVID-19 related laws, restrictions and regulations, including any applicable quarantine, testing, and immunization requirements.



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Voluntary Participation, Risks. I have decided to voluntarily participate in the Program and understand and agree to accept any and all risks associated with participating in the Program, including but not limited to damage to property, physical and/or psychological injury, illness, and death, and will not hold JDC responsible for any claims or losses that may arise out of my participation in the Program. I acknowledge that activities during the Program may be subject to certain hazards and that by voluntarily participating in the Program and these activities I understand the dangers and risks involved.

Liability Release. I agree that the JDC will not be liable for any action taken or omitted to be taken by JDC including in any way related to COVID-19, and in connection with or in any way related to the Program, my participation therein, or any travel related thereto. I understand and agree that JDC will not be responsible for the operation and management of any of the facilities which may be used or visited in connection with the Program or for the actions or inactions of any third parties, or for any damage or claim arising therefrom. I covenant not to sue in a court of law or equity or to otherwise pursue a legal action against JDC relating to any claims or losses that may arise out of my participation in this Program.

Indemnity. I agree that JDC will not be liable for any action taken or omitted to be taken by any third party, including but not limited to physicians, sponsors or participants affiliated with the Program, in connection with or in any way related to the Program or my participation. I hereby release, indemnify, and agree to hold harmless, to the fullest extent permitted by law, JDC from and against any and all loss, claims, damages, liabilities, or actions (including, without limitation, any loss, claims, charges, liabilities, or actions arising out of the negligence or alleged negligence of any third party) in any way arising out of, connected with, or attributable to my participation in the Program (including, without limitation, any general medical treatment, or emergency medical treatment rendered to me in the event of need).

Media Policy. I agree to abide and be bound by JDC's rules and regulations for the use of social media related to the Program. I further agree to consult with JDC prior to publishing any material/articles related to the Program and to allow JDC the opportunity to read and edit pieces prior to publication, or to prevent publication, in order to protect material that may be sensitive to the people whom we serve.

Photo/Video/Image Release. I agree and understand that my voice, name, and image may be recorded or photographed. I grant to JDC, and any and all of its affiliates, successors, licensees, and assigns, the universal and perpetual right to use, and to grant others the right to use, my actual or simulated likeness, photograph, voice, personal characteristics and other personal identification in all manner and media whatsoever in, and in connection with JDC's activities (including, but not limited to, websites, newsletters, brochures, and other publications, and for fundraising purposes). I acknowledge and agree that JDC shall be the exclusive owner of all rights in and to all photographs and/or recordings containing my voice, name, and/or image, taken or made in connection with the Program and to the extent I have any such rights, I grant to JDC any and all rights, including but not limited to all copyrights and other intellectual property, that I may have in and to any and all such photographs and recordings. I agree and understand that JDC may share such information as my name, email address, school, and/or hometown with its partners and funders in connection with the Program.

By signing below, I acknowledge that I have read, understood, and agreed to the terms of participation in the Program.

Name of Participant (please print): ______

Signature:

Date: _____