## PANDEMIC/ENDEMIC SAFETY PROTOCOL FOR CONFERENCE PARTICIPATION

As a participant attending the **FBINAA National Annual Training Conference** on July 20 – July 23, 2024, in Kansas City, Missouri, I acknowledge and consent to comply with the following public health and safety protocols and requirements.

Safety is the Conference's First Priority. I understand that the FBINAA, local law enforcement, public health officials, and the conference host hotel are focused on executing a safe and secure training opportunity for its participants and attendees and that the Conference will follow state and federal guidelines, which are in place at the time of the Conference, along with any additional requirements or measures which the FBINAA, local law enforcement, and public health officials deem necessary and require for the health and safety of our participants.

Assumption of Risk. I acknowledge and understand that my, and my guest's participation and attendance at the FBINAA Conference includes possible exposure to, and illness from, infectious diseases including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist. I knowingly and freely assume all such risks related to illness and infectious diseases, such as COVID-19, and knowingly assume the risk of injury, harm, and loss associated with my participation at the FBINAA Conference, including any injury, harm, and loss caused by the negligence, fault, or conduct of any kind on the part of the FBINAA.

**Responsible for Personal Safety**. I declare that I am fully and personally responsible for my and my guest's safety and actions during participation and attendance at the FBINAA National Annual Training Conference.

**Mask Wearing and Social Distancing**. I agree that I, and my guest, will be prepared to wear a mask and comply with social distancing requirements within the Conference space as may be directed at the time of the Conference.

**Duty to Self-Monitor**. I agree that I, and my guest, will self-monitor for signs and symptoms of COVID-19 (symptoms typically include fever, cough, and shortness of breath) and follow state, federal, FBINAA, and conference venue guidelines and notification procedures if I, or any member of my party, experiences symptoms of COVID-19 before, during, or within 14 days after participating at the Conference. I further agree to discontinue my participation immediately, and seek appropriate medical attention, if I or my guest experience any of these or any other symptoms during the Conference.

## **Liability Waiver and Release of Claims**

With full knowledge of the risks involved, I hereby release, waive, and discharge the FBI National Academy Associates, Inc. (FBINAA), its officers, board of directors, independent contractors, affiliates, employees, representatives, and successors from any and all liabilities, claims, demands, actions and cause of action whatsoever, directly or indirectly arising out of or related to any loss, damage, injury or death, that may be sustained by me or my guest related to an infectious disease, including COVID-19 and variant viruses while participating in any activity at or associated with the FBINAA Conference.