CEMETERY PROGRAM LIABILITY RELEASE

For Hill Country Archeological Association

DATE: _____

I, the undersigned, hereby release the property owner(s)

from any and all liability for my safety and well- being while on his/her/their property in ______ County, Texas. I will not take, damage, or destroy anything on the property. Furthermore, I will not visit the property without the owner's consent.

I will maintain the confidentiality of the property, its content, its owner's name(s) and the location of the property as much as I possibly can. However, by law the location of the cemetery may be filed in the county deed records and made available to the Texas Historical Commission and therefore accessible to the public.

I the undersigned, have been advised as to the protocol for any HCAA field work during the current period of national/global concern for the Covid19 virus. This includes, but is not limited to, proper social distancing while in the field, your testament that you do <u>not</u> have any symptoms such as cough or fever, or that you have <u>not</u> been recently exposed to anyone who has such symptoms.

By signing this form, you are agreeing to hold harmless Hill Country Archeological Association officials in the event you should be diagnosed with symptoms of, or a positive test for the Covid19 virus.

Name	Signature
Name	
Name	
Name	
Name	
Name	Signature
Name	
Name	
Name	Signature