**Municipal Excess Liability Joint Insurance Fund**

 9 Campus Drive – Suite 216

 Parsippany, NJ 07054

Tel (201) 881-7632

Fax (201) 881-7633

To: Member Municipalities and Authorities

From: Fred Semrau, MEL Fund Attorney

Date: June 30, 2020

Re: Public Health Emergency

We have been asked if there are liability precautions with re-opening public facilities and programs. As a general principle, public entities have substantial immunities from lawsuits in public emergencies so long as they act in good faith. Therefore, the emphasis is to make sure the emergency orders are being followed and participants understand and acknowledge the new risks that are inherent in activities.

Attached is a model acknowledgement that should be considered for use with recreation programs.

For further information, refer to the MEL’s web site, NJMEL.ORG.

Please feel free to reach out to your Risk Manager, Claims Adjuster or JIF Executive Director if you have any questions or concerns.

cc: Risk Managers

 Executive Directors of Participating Funds

COVID-19 ACKNOWLEDGEMENT FORM FOR [INSERT MUNICIPALITY]

DEPARTMENT OF RECREATION

BACKGROUND

[INSERT MUNICIPALITY] and the [INSERT MUNICIPALITY] Department of Recreation (“INSERT MUNICIPALITY”) offer the public the option to participate in or attend indoor and outdoor physical, social and educational programs/activities (“Recreation Programs”) held on [INSERT MUNICIPALITY] property and other public and semi-public places accessible to large numbers of people on a daily basis.

Due to the COVID-19 pandemic, individuals age 18 or older who wish to enroll themselves, their child or other dependent family members into a Recreation Program, or who seeks to volunteer in a Recreation Program, must complete, sign and return this Acknowledgement Form to [PROGRAM REPRESENTATIVE] by no later than \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2020, or by the Recreation Program’s enrollment deadline. Enrollment and participation/volunteering in a Recreation Program is conditioned upon timely submittal of a completed Acknowledgement Form.

ACKNOWLEDGEMENT

I/We acknowledge that I/WE have been provided with, read and fully understand this Acknowledgement Form, the Center for Disease Control’s (“CDC”) and the New Jersey Department of Health’s (“NJDOH”) information and guidelines regarding COVID-19 and Multisystem Inflammatory Syndrome in Children (“Pandemic Illnesses”), and the [INSERT MUNICIPALITY] Department of Recreation’s “COVID-19 Operational Plan” for 2020.

I/We further acknowledge that the Pandemic Illnesses: (1) are highly contagious and may cause serious permanent bodily injury, including death, of healthy persons of all ages; (2) are subject to changing recommendations on limiting the risk of exposure and spread; (3) remain prevalent throughout New Jersey; (4) are highly likely to spread to persons in direct contact with or in close proximity to (within about 6 feet) an infected person; (5) believed by the CDC/NJDOH to spread by droplets produced into the air when an infected person coughs, sneezes, talks or otherwise moves air out through their nose and mouth, and from touching surfaces on which droplets containing the virus exist.

I/We further acknowledge that attending or participating in a Recreation Program poses an inherent and heightened risk of exposure, infection, and bodily injury from the Pandemic Illnesses regardless of preventative measures taken by [INSERT NAME OF MUNICIPALITY].

I/We, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (hereinafter “I/We), acknowledge and represent that I/We am/are the parent(s)/legal guardian(s) of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent(s)/Guardians Date

Signature of Program Participant(s) Date