

Employee COVID-19 Waiver Form

The **COVID-19 waiver form sample** for employees is designed to ensure workplace safety by documenting acknowledgment of the risks associated with the virus. This form helps employers communicate necessary precautions and liability disclaimers clearly. It is an essential tool in maintaining a safe and informed work environment during the pandemic.

Employee Information

Full Name:

Department:

Date:

COVID-19 Risk Acknowledgment

I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by working at the company premises. I understand that exposure or infection may result in personal injury, illness, permanent disability, or death.

I agree to comply with all company safety protocols, guidelines, and procedures to limit the spread of COVID-19 as established by the company and public health authorities.

Waiver and Release

I hereby release, waive, and discharge the company, its officers, directors, employees, and agents from any and all liability, claims, demands, actions, or causes of action directly or indirectly arising out of or related to any loss, damage, or injury that may be sustained by me related to COVID-19 while participating in any activity related to my employment with the company.

Signature

Employee Signature:

Date:

Submit