

## Taucks Travel Well Pledge

Please complete and submit this form to your Tauck Director on the first day of your trip.

By joining a Tauck journey, it's important that every guest assumes personal responsibility for their own health to help protect the well-being of their fellow travelers, the Tauck staff, our supplier partners and the places we visit. To assist us in this important goal, we are implementing this *Travel Well Pledge*.

Please complete and submit this form to your Tauck Director on the first day of your trip.

Trip Start Date: \_\_\_\_\_

Name of Trip: \_\_\_\_\_

Name (as shown in passport): \_\_\_\_\_

### Initial

\_\_\_\_ I confirm that I am either fully vaccinated or that I have received a negative PCR COVID-19 test within five days of my departure for this journey. For example, the CDC considers you "fully vaccinated" two weeks after a second dose of the Pfizer or Moderna vaccines, or two weeks after a single dose of the Johnson & Johnson vaccine.

\_\_\_\_ I confirm that I have not had close contact with, or helped care for, anyone suspected or diagnosed as having COVID-19, or who is currently subject to health monitoring for possible exposure to COVID-19 since being tested prior to departing for my Tauck journey.

\_\_\_\_ I understand that Tauck cannot guarantee that I, or those I'm traveling with, will not become infected with COVID-19. As such, I agree to hold Tauck harmless and voluntarily assume all risks and related expenses in the event that I, or any member of my traveling party, becomes infected with COVID-19.

I pledge that the above declarations are true and understand that any dishonest answers may have serious public health implications. I agree to take personal responsibility for my health and well-being, to practice social distancing in public spaces, and to follow the instructions of Tauck staff and their supplier partners regarding health protocols. I understand that noncompliance with these measures by myself or my traveling party will result in our party not being able to continue on this Tauck journey.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## **Waiver of Liability for COVID-19**

*The safety and comfort of our guests has always been of paramount concern to Tauck. We have worked diligently to give you the peace of mind you expect. However, there is no way to eliminate all possible risks while traveling and Tauck therefore cannot assume liability in the unlikely event you contract COVID-19. This is the reason for the necessity of the following waiver of liability:*

The novel coronavirus, Covid-19, (herein "COVID-19") has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact.

Tauck, Inc. ("Tauck") has put in place preventative measures to reduce the spread of COVID-19. However, Tauck cannot guarantee that you or your travel party will not become infected with Covid-19. In fact, traveling on a Tauck trip and participating in its activities could increase your risk of contracting COVID-19.

By signing this agreement, 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 participating in the Tauck trip and that such infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming infected by COVID-19 on a Tauck trip may result from the actions, omissions, or negligence of myself and others, including, but not limited to Tauck employees, suppliers (and their employees) and other passengers. I understand that complete knowledge of the risk factors of contracting COVID-19 is not complete and that unknown or unanticipated risks may result in injury, illness, death or any other loss. I agree that having considered these risks, I desire to participate in the tour and I freely and voluntarily assume complete personal responsibility for the risk of exposure, illness and death due to COVID-19, even if such injuries or death occur in a manner that is not foreseeable at the time this agreement is signed.

I for myself, and on behalf of my and their heirs, assigns, personal representatives and next of kin voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury (including, but not limited to personal injury, disability, and death), illness, damage, loss, claim, liability or expense of any kind that I may experience or incur in connection with my Tauck trip and its activities ("Claims"). I hereby release, covenant not to sue, discharge and hold harmless Tauck, its employees, agents, and representatives, of and from the Claims. Including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or related thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of Tauck, its employees, agents and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Tauck trip.

I HAVE READ THIS WAIVER OF LIABILITY, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

I agree that if any portion is found to be void or unenforceable, the remaining portions shall remain in full force and effect. No additions, deletions or changes can be made to the release form, and signing it is a requirement for joining the trip.

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Signature of Participant

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Date