



## Travel Well Agreement

*Please complete and return this form to Pack A Fork at [info@packafork.com](mailto:info@packafork.com) or by sending to P.O. Box 1346, Erie, CO 80516*

By joining a Pack A Fork tour, it is important that every guest assumes personal responsibility for their own health to help protect the well-being of fellow travelers. To assist us in this important goal, we are implementing this *Travel Well Agreement*.

Name of Tour \_\_\_\_\_

Tour Start Date: \_\_\_\_\_

Name: \_\_\_\_\_

*(as shown on passport)*

### Please Initial

\_\_\_\_\_ I confirm that I am fully vaccinated. The CDC considers a person 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 will not have had close contact with or helped care for anyone suspected or diagnosed as having COVID-19, or who will be subject to health monitoring for possible exposure to COVID-19.

\_\_\_\_\_ I understand that Pack A Fork cannot guarantee that I, or those I'm traveling with, will not become infected with COVID-19. As such, I agree to hold PAF harmless and voluntarily assume all risks and related expenses in the event that I become infected with COVID-19.

I agree to take personal responsibility for my health and well-being, to practice social distancing in public spaces, to wear masks as mandated by local guidelines and to follow the instructions of PAF staff and their supplier partners regarding health protocols.

All guests must provide one of the following. Please send a copy with this signed agreement:

- A government-issued certificate, such as the CDC COVID-19 Vaccination Record Card, indicating that you are fully vaccinated and received the final required dose no later than 14 days prior to the start of this tour.
- A doctor's letter indicating full recovery from COVID-19.

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