

# Jerusalem Center Covid-19 Protocol Agreement

I confirm, acknowledge, and agree to all of the following:

- ☐ I have completed Covid-19 vaccination (Moderna, Pfizer or Johnson & Johnson).
- ☐ I have attached a copy of the Covid-19 vaccination documentation.
  
- ☐ I will take a PCR test within 72 hours of my expected arrival in Tel Aviv.
- ☐ I will take a PCR or serological test upon arrival in Tel Aviv as required by the Israel Health Ministry.
- ☐ If required, I will take a PCR or serological test when I depart Israel for field trips to Jordan, Greece or Egypt and upon arrival in Israel from one of these countries.
- ☐ If required, I will take a PCR or serological test upon arriving in and departing from Jordan, Greece or Egypt.
- ☐ If required, I will take a PCR or serological test when I depart Israel for the US.
- ☐ If required, I will take a PCR or serological test when I arrive in the US.
  
- ☐ I will wear a mask covering both my nose and mouth, abide by all social distancing requirements and travel restrictions set forth by the Israel Ministry of Health or the Jerusalem Center administration.
- ☐ I will wear a mask covering both my nose and mouth as required by local rules in airports and by airlines for the durations of all flights.
  
- ☐ If a PCR or serological test is positive, I may not be allowed to enter a country or, if entry is permitted, be required to quarantine.
- ☐ I will comply with any other government-imposed or Jerusalem Center-required Covid-19 protocols.

For more information, please refer to the following websites:

[www.cdc.gov](http://www.cdc.gov)

<https://www.gov.il/en/departments/topics/ministry-of-health-gov>

<https://il.usembassy.gov/covid-19-information/>

I, \_\_\_\_\_, hereby confirm, acknowledge, and agree that I have completed a two part Covid-19 vaccination, that I will provide the documentation, and that I am willing to undergo whatever PCR or serological tests are required to enter and leave Israel, Jordan, Greece or Egypt and the United States. I further confirm, acknowledge, and agree that I will fully comply with all requirements stated above.

I expressly and voluntarily release, hold harmless, and covenant not to sue Brigham Young University, including its Student Health Center and the Jerusalem Center, and its employees, officers, volunteers, contractors, affiliates, and agents (the "Released Parties"), from and for any claims or liability which may arise from any illness or trauma (physical, mental, or emotional) that I may suffer as a result of Covid-19, vaccinations, tests, mask wearing, or other travel restrictions and protocols related to my participation in the Jerusalem Center program, even if the claims or liability allegedly result from the ordinary negligence of the Released Parties.

Signature

Date

Signature of Witness\*

Date

\***Anyone** can serve as a witness as long as he or she watches you sign the form.