Event Acknowledgment Form – Waiver & Release of Liability

I have voluntarily chosen to attend a Wisconsin Mortgage Bankers Association event held at the offices of Fairway Independent Mortgage Corporation ("Fairway"). I understand I must sign this Event Acknowledgment Form – Waiver & Release of Liability ("Waiver") before attending such event. By attending this event, I acknowledge and agree with all of the following:

- I understand that social distancing may not be enforced.
- I understand that the Centers for Disease Control ("CDC") has advised that fully vaccinated individuals may resume activities without wearing a face covering or social distancing.
- I understand that if I have not been fully vaccinated, it is recommended that I continue to wear a face covering and socially distance for my safety.
- I understand that it is my own responsibility to practice social distancing if I have not been fully vaccinated and do not feel comfortable being in close proximity to others.
- I understand that even if I have been fully vaccinated, I may still contract COVID-19.
- If I or anyone living in my household was diagnosed with, or is showing symptoms of, the COVID-19 virus, I will not attend the event unless I am no longer deemed a risk of transmitting the infection to others based on guidance from my healthcare provider, the CDC, and/or local public health authorities.
- If I am considered a vulnerable individual at high risk for morbidity or mortality from the COVID-19 virus, or if someone I live with or provide critical support is considered at such risk, I understand that I should choose to attend this event at my own risk.

I understand and assume the risk of attending this event at this time, which may entail illness or contracting the COVID-19 virus. I expressly agree on behalf of myself, my heirs, executors, administrators, successors, and assigns that Fairway and its insurers, managers, employees, officers, directors, and associates (collectively the "Releasees") shall not be liable for damages sustained by me while attending this event, regardless of whether such damages result in whole or in part from the Releasees' negligence. By signing this Waiver, I accept and assume full responsibility for any and all injuries, damages (both economic and non-economic), and losses of any type that may occur and hereby fully and forever release and discharge the Releasees from any and all claims, demands, damages, and rights or causes of action, present or future, known or unknown, anticipated or unanticipated, resulting from attending this event at this time. I expressly agree to indemnify, defend, and hold harmless the Releasees against any and all claims, demands, damages, and rights or causes of action of any person or entity arising from injuries, illness, or damages caused by my attending this event at this time. This Waiver shall be construed broadly to provide a release and waiver to the maximum extent permitted by applicable law.

I certify that I have read and understand this Waiver and have voluntarily executed it with full knowledge of its contents.

| Printed Name: | Date: |
|---------------|-------|
| Signature: | |