

DEKALB COUNTY SCHOOL DISTRICT
SUMMER 2020 RETURN TO PARTICIPATION

Release of Liability and Waiver

PLEASE READ ENTIRELY BEFORE SIGNING

Student participation in athletic and extracurricular activities is a privilege afforded to students by the DeKalb County School District (District). As a condition of your Student's participation in District extracurricular and athletic programming, including summer practice and/or conditioning programs, parent/guardian must sign the following release. Please understand that Student's participation in athletic and extracurricular activities and events during the summer or regular school year is entirely voluntary, as is your execution of the below waiver. Signature of this form is required to allow for Student participation.

IN CONSIDERATION OF _____ (Student) being allowed to participate in the DeKalb County School District's Summer 2020 athletics and/or extracurricular programs and related events and activities, the undersigned acknowledges and agrees to the following:

I understand that the risks of injury and illness (ex: communicable diseases, such as influenza, tuberculosis, pneumonia, hepatitis and COVID-19) to Student from the activities involved in these programs are significant. Further, Student may sustain physical injury or illness (minimal, serious or catastrophic) in connection with his/her participation and interaction with other students, including the potential for permanent disability and death. While safety rules, equipment, and hygiene may reduce these risks, the risks of serious injury and illness cannot be eliminated. The risk to have contact with individuals, who have been exposed to, who are currently infected with or who have been diagnosed with one or more communicable diseases, including but not limited to COVID-19, other medical conditions, diseases, or infections does exist. It is impossible to eliminate the risk that Student could be exposed to and/or become infected through contact with or close proximity with an individual with a communicable disease if he/she elects to participate in District athletic or extracurricular activities and events. In addition to the risk of infection posed to Student by possible infection, this may put others that Student has close contact with at risk of infection. I understand that if Student, Student's family or household members have underlying health conditions or a compromised immune system, they may be more susceptible to risk of infection and/or illness, including COVID-19, and I have carefully considered these risks and consulted as appropriate with a licensed healthcare provider prior to making any decision regarding Student's voluntary participation in athletic or extracurricular activities.

Therefore:

1. I, for myself and on behalf of Student and Student's parents, guardians, heirs, executors, administrators, assigns and next of kin, knowingly and freely acknowledge and assume all such risks, both known and unknown, and full responsibility for Student's participation; and
2. I, for myself and on behalf of Student and Student's parents, guardians, heirs, executors, administrators, assigns and next of kin, hereby release, discharge, indemnify, and agree to hold harmless the DeKalb County School District (DCSD), Members of the DCSD Board of Education, its past, present and future officers, attorneys, agents, employees, predecessors and successors in interest, and assigns, hereinafter "DCSD releasees", from any and all liability arising out of or in connection with Student's participation in athletic and extracurricular activities and related events. For purpose of this Release, liability means all claims, demands, losses, causes of action, suits, or judgments of any kind that Student and Student's parents, guardians, heirs, executors, administrators, assigns and next of kin have or may have against the DCSD releasees because of Student's personal, physical, or emotional injury, accident, illness or death, or because of any loss of or damage to property that occurs to Student or Student's property during participation in athletic and extracurricular activities and related events due to acts of passive or active negligence by DCSD releases other than actions involving fraud or actual malice.
3. I, for myself and on behalf of Student and Student's parents, guardians, heirs, executors, administrators, assigns and next of kin, assume all liability and responsibility for any and all potential or real risks, injuries or even death which may result from Student's participation in athletic and extracurricular activities and related events. I represent and warrant that I know of no mental or physical condition or illness, including symptoms, infection or known exposure of Student to COVID-19 or other communicable disease, that would make it unsafe for Student to participate in inter-scholastic athletics, sports teams/clubs and events, whether based upon risk to Student or other participants. I understand, acknowledge, and agree that the DCSD School District shall not be liable for any injury/illness suffered by the Student or another individual which arises out of and/or is associated with Student's participation in athletic and extracurricular activities and related events.

4. I further understand that the District has established rules and regulations pertaining to conduct, behavior, activities, health/hygiene and the safety/wellbeing of all students by which my child must abide during participation in this program. These include rules to mitigate the risk of spread of communicable disease, including but not limited to COVID-19. Student and I accept the risk and will be responsible for his/her failure to abide by these rules.
5. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual concern regarding my child's wellness and fitness for participation whether mental or physical, I will immediately remove my child from participation and bring to attention of a coach, District staff or nearest official immediately. This requirement includes immediate notice and removal of Student from athletic and/or extracurricular participation due to any COVID-19 (or other communicable disease) symptoms, confirmed or suspected infection and confirmed or suspected exposure; and
6. I, the parent/guardian, assert that I have explained to Student: the risks of the activity, his/her responsibilities for adhering to the rules and regulations, the importance of health-safety guidelines to mitigate the risk of spread of COVID-19 or other communicable disease, and that Student understands and agrees to abide by this agreement.

By signing below, Parent/Guardian and Student hereby grant permission for Student's participation in Summer 2020 Athletic and/or Extracurricular Activities and Events for DeKalb County School District. Signing below indicates acknowledgement that Undersigned and Student have carefully reviewed and agree to all above terms of athletic participation, including voluntary waiver, release and assumption of risk, fully understand its terms, along with the risk, and acknowledge that it has been signed freely, voluntarily and without inducement.

Name of Student (Printed): _____

Name of Parent/Guardian (Printed): _____

Parent/Guardian Signature: _____

Student Signature: _____

Date Signed: _____