

COVID-19 RELEASE AND WAIVERS OF CLAIM ("RELEASE")

	Today's Date:
Please complete and sign this form before participation	on in voluntary workouts:
The undersigned, in my capacity as parent or legal health risks and dangers associated with the trans other communicable diseases, and recognizes that other communicable diseases, could occur while Preparatory Charter School. As such, and in const University Preparatory Charter School I, as parent fully understand and acknowledge the contents of voluntarily waiving, releasing, indemnifying and Charter School and its officers, directors, employ liability, damages, and each and every action (column/or associated with the services including, but of the COVID-19 virus.	mission of the COVID-19 virus, and t exposure to the COVID-19 virus, or my child is in the care of University ideration for services to be provided by t and/or legal guardian, have read and f the Release and agree that I am discharging University Preparatory ees and volunteers from any and all lectively, "Claims") by participation in
I represent that I have full authority to sign on be- binds each other person having authority to make	
My signature below is confirmation that I have reacknowledge the contents of the Release and agree releasing, indemnifying and discharging University officers, directors, employees and volunteers from	ty Preparatory Charter School and its
Child's Name:	

Signature of Parent/Guardian: