



Student Athlete Assumption of Risk and Waiver with COVID Supplement

Student Name _____ Activity _____

Parent/Guardian _____

On behalf of my child, I (parent/guardian) hereby acknowledge and agree that activities such as those listed above have inherent risks such as minor physical/emotional injuries like cuts, bruises, sprains; to serious physical injuries like breaks, dislocations, serious wounds, cardiovascular issues, traumatic brain injury and possibly even a risk of death. *Additionally, I acknowledge that COVID risks may also be present through participation in this activity.* I have sufficient knowledge of the nature and extent of the risks associated with these activities and the use of facilities and equipment associated with these activities. If I had any questions or concerns regarding possible risks, I have addressed them with the activity/program or sponsor.

I further acknowledge that the risks communicated by the activity/program sponsor may not be inclusive of all the possible risks associated with the _____ (activity/school program) and that the activity/program facilitator(s) may not have anticipated all of the risks associated with the above activities.

I accept the fact that the program facilitator(s) cannot guarantee my child's total safety since some risks in such activities are beyond their control. I fully comprehend and willingly assume the responsibilities and risks of participating in this program, as outlined in information communicated to me by the facilitator(s).

I understand that if I experience an injury/illness, including a concussion, then it is my responsibility to inform the activity/program sponsor immediately. I hereby give my consent to have my child seen by emergency medical personnel, a physician, or a nurse and treated if necessary in case of sudden illness or injury while participating in the above activity. It is understood that Jeffco Public Schools provides no medical insurance for such treatment and that the cost thereof will be at my expense.

_____(initials child) _____(initials guardian) I and my child agree to follow all instructions and guidelines given by the facilitators, and to act in a safe and responsible manner toward all participants, *including those set forth in attachment A to this document, COVID Supplement.*

I (parent/guardian), _____, hereby waive, release, and discharge the Jeffco Public Schools and their/its successors, heirs, assigns, directors, officers, employees, supervisors, agents, attorneys and representatives, from any and all actions, causes of action, claims, demands, losses, damages, costs, attorneys' fees, judgments, liens or liabilities whatsoever, regarding the aforementioned activity in which I and my child have elected to voluntarily participate.

Dated this _____ day of _____, 20____

Student Athlete's Signature

Dated this _____ day of _____, 20____

Parent's Signature

RETAIN FORM IN CORRESPONDING ACTIVITY FILE AT SCHOOL – FOR AT LEAST 1 YEAR FROM DATE OF SIGNATURE

6/13/2020

Attachment A, COVID Supplement

Athletes commit to:

- STAY HOME IF YOU FEEL SICK OR IF YOU ARE EXPERIENCING COVID-19 RELATED SYMPTOMS.
- Stay at least 6 feet (about 2 arms' length) from other people.
- Wash hands and/or use hand sanitizer frequently.
- May wear cloth or disposable face masks as required (indoors) or recommended (outdoors); an athlete choosing to wear a mask will not be discouraged from doing so.
- Do not touch face, eyes, nose, mouth with hands. Sneeze into your elbow.
- Athletes are encouraged to bring sport-specific gloves and equipment; these are not to be shared with others.
- Do not gather in groups. Stay out of crowded places and avoid mass gathering.
- Launder workout clothes after each workout.
- Wait in their cars with guardians until just before the beginning of a practice, warm-up, or game, instead of forming a group.
- Do not engage in unnecessary physical contact, such as high fives, handshakes, fist bumps, or hugs.
- Plan on bringing enough water to get through the workout. Common water sources will not be available.
- Limit the use of carpools or van pools. When riding in an automobile to a sports event, it is preferred that players to ride to the sports event with persons living in their same household.
- Each coach/sponsor will escort participants to their vehicle and/or pick up areas to depart from campus/area. No gathering after workouts will be allowed.
- Each sport will have specific disease transmission controls that coaches will share; athletes will follow that additional guidance. (Athletics, 2020) (Control, 2020)

Parents commit to:

- Notify the coach if the athlete or another member of the family is experiencing COVID-19 symptoms or is determined to test positive or be presumed positive for COVID-19.
- Athletes are to wait in their cars with guardians until just before the beginning of a practice, warm-up, or game, instead of forming a group.
- Limit the use of carpools or van pools. When riding in an automobile to a sports event, it is preferred that players to ride to the sports event with persons living in their same household.
- No spectators will be allowed - Parents or transportation providers will remain in their cars at all times. (Athletics, 2020) (Control, 2020)

References

Athletics, J. P. (2020, 6). *Return to Workout Plan, Jeffco Athletics*. Retrieved from Jeffco Athletics.

Control, U. C. (2020, 5 29). *Considerations for Youth Sports*. Retrieved from CDC Coronavirus Disease 2019:

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/youth-sports.html>