

Athletic Participation Consent And Release Form

By my signature below, I/we consent to _____'s ("Student") participation in athletic activities sponsored by _____ (the "School")'s, including athletic activities held on the School's premises and athletic activities held at other venues.

I/we understand and acknowledge that Student's participation in school-sponsored athletic activities may expose Student to contact with one or more persons or objects that have been infected with, and/or exposed to, diseases or viruses, including novel SARS-CoV-2, the virus commonly known as COVID-19. I/we understand that, as a result, Student's participation in school-sponsored athletic activities may expose Student to the risk of exposure to or infection with diseases or viruses (such as COVID-19). I/we understand that the potential risks associated with exposure to or infection with the diseases or viruses (such as COVID-19) are not fully known, but have shown to include significant and serious illness, inflammation, and clotting within every organ in the body. Examples of identified conditions include, but are not limited to: cardiomyopathy, myocarditis, arrhythmia, micro clotting, venous embolism, stroke, reactive airway, obstructive pulmonary disease, renal impairment, liver impairment, chronic fatigue syndrome, irregular bowel habits, and nervous system disorders. It is still unknown if the systemic and/or multi-organ involvement is temporary or will prove to cause permanent chronic disease or disability. I/we understand that current athletic league rules do not mandate universal use of personal protective equipment (such as masks) and that the use of personal protective equipment may not fully protect against or mitigate the risks posed by Student's participation in school-sponsored athletic activities. It is likely that my/our student will encounter competitors that are not masked, and I understand that leagues have left the determination of what is safe to each individual campus, which will result in varied and inconsistent safety plans depending on the venue and location. I/we understand and agree that information regarding the COVID-19 status of Student and/or individuals that live in the same household as Student may be disclosed to others in the School community, as the School—in its sole discretion—deems necessary by public health standards for contact tracing. I/we understand that the participation in these school-sponsored athletic events is in violation of current recommendations by Dallas County Health and Human Services, and other public health advisory organizations.

I/we understand that as a result of Student's participation in athletic activities, Student may be subject to special rules and regulations promulgated by the School, including, but not limited to, enhanced health screenings, alternative cafeteria schedules, and/or required participation in remote learning settings. Further, I/we understand that the School may, in its sole discretion, cancel any school-sponsored athletic activities at any time without advanced notice.

Nevertheless, having considered the risks, including those outlined in this Release, I/we consent to Student's participation in school-sponsored athletic activities. Accordingly, for good and valuable consideration, including without limitation admitting Student to the School and allowing Student to participate in school-sponsored athletic activities, **I HEREBY ASSUME ALL OF THE RISKS OF STUDENT'S PARTICIPATION IN SCHOOL-SPONSORED ATHLETIC ACTIVITIES, INCLUDING WITHOUT LIMITATION, THE RISK THAT STUDENT MAY BE EXPOSED TO OR BECOME INFECTED WITH DISEASES OR VIRUSES (SUCH AS COVID-19).**

I/WE HEREBY, FOR MYSELF AND MY HEIRS, SUCCESSORS, AND ASSIGNS, AND ALL THOSE CLAIMING BY OR THROUGH ME, WAIVE, RELEASE, AND AGREE TO DEFEND, INDEMNIFY, AND HOLD HARMLESS THE SCHOOL AND ITS AGENTS, EMPLOYEES, OFFICERS, DIRECTORS, DONORS, CONSULTANTS, RETAINED PROFESSIONALS, AND AFFILIATES (COLLECTIVELY “INDEMNITEES”) FROM AND AGAINST ANY LIABILITY, LOSS, EXPENSE, OR OTHER DAMAGE, INCLUDING PERSONAL INJURIES, PROPERTY DAMAGE, DEATH, COSTS OF COURT, AND ATTORNEYS’ FEES, ARISING FROM OR IN CONNECTION WITH STUDENT’S PARTICIPATION IN SCHOOL-SPONSORED ATHLETIC ACTIVITIES, INCLUDING THOSE WHICH ARISE OR ARE ALLEGED TO ARISE FROM THE NEGLIGENCE OF ANY INDEMNITEE.

Parent Signature:
Parent Printed Name:
Date:
Parent Signature:
Parent Printed Name:
Date:
Student Signature (if age 18 or over):
Date: