

Fall Waiver for Activities

Permission and Waiver of Liability for Student Participation at Holden R-III Schools

By signing below, I give permission for my student, _____ to participate in programs and activities in Fall, 2020 at Holden R-III Schools.

I acknowledge that federal and state government officials have declared there currently exists a public health crisis in our country related to the Coronavirus Disease ("COVID-19") and the World Health Organization has declared COVID-19 a worldwide pandemic.

I confirm that my student has not been diagnosed with, demonstrated any symptoms of or has in any way been exposed to any communicable disease (including, but not limited to, COVID-19) within the past thirty (30) calendar days.

I confirm that I will not permit my student or myself to participate in programs or activities if, at any time during the program or activity, my student or I am showing any symptoms of COVID-19 (including but not limited to fever, dry cough, fatigue, shortness of breath, chills, muscle pains). Additionally, I confirm that I will not permit my student or myself to participate in the program or activity if, at any time during the program or activity, my student or myself have been in contact with any individual diagnosed with COVID-19 or any individual currently waiting the test results confirming the possibility of a COVID-19 diagnosis. I agree that in such situations, my student and I will be unable to participate in the program or activity until; (i) 14 calendar days after the symptoms first appeared and my student or I am no longer showing any symptoms; or (ii) a healthcare provider has confirmed in writing that my student or I have tested negative for COVID-19 or that my student's or my symptoms were not due to COVID-19.

I acknowledge that Holden R-III Schools has put in place preventative measures to reduce the spread of COVID-19; however, Holden R-III Schools cannot prevent the possible transmission or contraction of COVID-19 for my student or myself. Further, attending programs and activities in Fall, 2020 could increase the risk of contracting COVID-19. I understand the risks associated with participation due to COVID-19 and am willingly letting my student and myself participate, accepting responsibility for my student's and my own health in doing so.

The undersigned agrees to release, discharge, hold harmless and indemnify the Holden R-III Schools its agents, employees, officers, Board of Education members, insurers and others acting on the District's behalf (the "Releasees"), of and from any and all claims, demands, causes of action and/or legal liabilities, including the cost of defending or prosecuting any such claims and demands, for injuries to or death of my student or myself occurring during, or resulting from, participation in the programs or activities of Fall, 2020 and related in any way to COVID-19, even if the cause, damages, or injuries alleged to be the fault or alleged to be caused by the act, negligence, default, omission, or carelessness of the Releasees.

**Programs and activities in Fall, 2020 are strictly voluntary. Your student in no way is required to attend and will not face any consequences or repercussions of any kind if you choose not to allow them to attend.*

Signature of Parent or Legal Guardian Printed Name of Parent or Legal Guardian Date

Signature of Student Printed Name of Student Date

THIS IS A WAIVER AND RELEASE OF LIABILITY