**CDPH INFORMED CONSENT SPORTS**

**COVID-19 ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT**

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(“Student”)

Parent/Legal Guardian’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Activity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I understand and agree as set forth below.

1. In consideration of the District permitting Student to participate in any and all interscholastic sports, I hereby waive any claim I may have against the District, its governing board, officers, agents, employees, volunteers, and representatives (“Released Parties”) for any injury or loss incurred by Student as a result of his or her participation in competition associated with the Activity, including practice or training sessions of the Activity. In addition, I hereby agree to pay, defend, indemnify, and hold harmless the Released Parties from and against any claim or liability, including claims that may arise because of injuries or loss incurred by Student, in any way relating to Student’s participation in the Activity, including practice or training sessions.

1. Participation in Activity includes possible exposure to, illness, and death from infectious diseases including, but not limited to, methicillin-resistant Staphylococcus aureus (MRSA), influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist.

1. To the fullest extent allowed by law, on behalf of Student and myself, I voluntarily assume all known and unknown risks of injury or illness, howsoever caused, even if caused, in whole or in part, by the action or inaction of the Released Parties, and assume full responsibility for Student’s participation.

1. I willingly agree to comply with the stated and customary terms and conditions for participation as they relate to protection against infectious diseases. I have reviewed the most recent directives from the Centers for Disease Control (CDC), the California Department of Public Health (“CDPH”) and Humboldt County Health Services, along with District policy and protocols, if any, regarding the risks associated with COVID-19 exposure and safe practices to follow, which have been provided to me by the District. I have informed and discussed the dangers of participation in the Activity and the required rules and regulations to allow participation in Activity with my child.
2. To the fullest extent permitted by law, I, for myself, and on behalf of my child, heirs, assigns, and representatives hereby release and hold harmless the Released Parties with respect to any and all illness, injury, disability, death, of my child related to or arising out of preparing for and/or participating in the Activity.
3. I have reviewed the most recent CDPH Guidance on Youth Sports and I understand and acknowledge the increased risk of transmission of COVID-19 in moderate-contact and high-contact-sports. (<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/outdoor-indoor-recreational-sports.aspx>)
4. I agree to Student’s weekly COVID-19 testing and also testing before competitions as required or recommended by any state or local regulation or guidance that the District adopts.

I HAVE READ THIS WAIVER OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT. I FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY.

Student’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_