

**Assumption of the Risk and Waiver of Liability Relating to
Coronavirus/COVID-19**

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing.

Campbell County Public Schools (CCPS) has put in place preventative measures to reduce the spread of COVID-19. However, CCPS cannot guarantee that you or your athlete will not become infected with COVID-19. Further, attending conditioning with CCPS could increase your athlete's risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my athlete may be exposed to or infected by COVID-19 by attending conditioning with CCPS. I understand that the risk of becoming exposed to or infected by COVID-19 at CCPS conditioning may result from the actions, omissions, or negligence of myself and others, including, but not limited to Coaches and other athletes. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my athlete or myself including illness, damage, loss, claim, liability, or expense of any kind that I or my athlete may experience or incur in connection with my athlete's attendance at CCPS conditioning or participation in events.

On my behalf, and on behalf of my athlete, I hereby release, covenant not to sue, discharge, and hold harmless CCPS, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of CCPS, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any CCPS event.

Parent/Guardian_____ Date_____

Print Name of Parent/Guardian_____

Athlete(s)Name_____