

Participation Waiver for Communicable Diseases Including COVID-19

PHASE II OF THE ATHLETICS/EXTRACURRICULAR PLAN ALLOWS FOR INCREASED CONTACT AMONG STUDENTS. BY SIGNING BELOW YOU ACKNOWLEDGE THE INCREASED RISKS ASSOCIATED WITH THESE CHANGES

The COVID-19 pandemic has presented athletics/extracurricular activities across the world with a myriad of challenges. The COVID-19 virus is a highly contagious illness that primarily attacks the upper respiratory system. The virus that causes COVID-19 can infect people of all ages. Research from the Centers for Disease Control, among others, has found that while children do get infected by COVID-19, relatively few children with COVID-19 are hospitalized. However, some severe outcomes have been reported in children, and a child with a mild or even asymptomatic case of COVID-19 can spread the infection to others who may be far more vulnerable. While it is not possible to eliminate all risk of furthering the spread of COVID-19, the current science suggests there are many steps schools can take to reduce the risks to students, coaches, and their families.

Possible symptoms of COVID-19 as provided by the CDC:

1. Any symptom may appear 2-14 days after exposure to the virus.
2. Fever or chills
3. Cough
4. Shortness of breath or difficulty breathing
5. Fatigue
6. Muscle or body aches
7. Headache
8. New loss of taste or smell
9. Sore throat
10. Congestion or runny nose
11. Nausea or vomiting
12. Diarrhea

ANY STUDENT EXPERIENCING ANY OF THESE SYMPTOMS ARE TO NOT TO ATTEND ANY PRACTICES OR TOURNAMENTS, UNLESS YOU HAVE A NEGATIVE COVID-19 DIAGNOSIS.

I understand that participating in extracurricular programs, events, and activities may include a possible exposure to a communicable disease including but not limited to MRSA, influenza, and COVID-19. While recommendations and personal discipline may reduce the risk, the risk of serious illness and death does exist. I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of others, and assume full responsibility for my participation. I willingly agree to comply with the stated expectations put forth by RAM Field Hockey to limit the exposure and spread of COVID-19 and other communicable diseases. We certify that _____ is in good physical condition or believe _____ to be in good physical condition and allow participation in this activity at our own risk. And by signing below, I agree to each statement above and release RAM Field Hockey from any and all liability for unintentional exposure or harm due to COVID-19.

I, the legal parent/guardian of (registrant) _____, agree that I and the registrant will abide by the rules and bylaws of RAM FIELD HOCKEY. Recognizing the possibility of physical injury associated with sports and activities and in consideration for RAM FIELD HOCKEY accepting the registrant for their sports programs and activities, I hereby release, discharge and/or otherwise indemnify RAM FIELD HOCKEY, their affiliated organizations and sponsors, employees, and associated personnel, against any claim by or on behalf of the registrant as a result of the registrant's participation in the programs.

Signature of Parent/Guardian: _____ Date: _____

Signature of Student Athlete: _____ Date: _____

Printed Student Name: _____ Grade: _____