

**Waiver and Release of Liability Relating to Coronavirus/COVID-19 for District Athletics
and Voluntary Strength Training and Conditioning Sessions**

SARS-CoV-2, the virus causing the COVID-19 illness, is extremely contagious and is believed to spread mainly from person-to-person contact and through respiratory droplets. COVID-19 may also be spread from asymptomatic or pre-symptomatic individuals. Spread is more likely when people are in close contact with one another (within about 6 feet). Evidence has shown that COVID-19 can cause serious and potentially life threatening illness and even death, including, but not limited to, complications such as respiratory failure, acute respiratory distress syndrome, cardiac injury, liver injury, infections, among other known and unknown illness and injury.

Playing sports and/or participating in voluntary strength training and conditioning sessions with other individuals, in any capacity during this time of pandemic, holds an inherent risk of a student-athlete becoming infected and potentially then infecting other individuals, such as their household members. Dupo Community Unit School District No. 196 (“the District”) cannot prevent your student-athlete from becoming exposed to, contracting, or spreading COVID-19 while participating in athletics and voluntary strength training and conditioning sessions in the District. Therefore, if you choose to allow your student-athlete to participate in District athletics and voluntary strength training and conditioning sessions, your student-athlete may be exposed to and/or may contract COVID-19. Please consult your student-athlete’s primary care physician about this risk and any increased risk that may be caused by any pre-existing health conditions your student-athlete may have, prior to returning to athletics and participating in voluntary strength training and conditioning sessions.

ASSUMPTION OF RISK: I have read and understood the above warning concerning COVID-19. I hereby knowingly and voluntarily accept and assume the risk that I may be exposed to, infected by, and/or contract COVID-19 for myself and/or my student-athlete by participating in District athletics and voluntary strength training and conditioning sessions and that such exposure or infection may result in quarantine, personal injury, illness, permanent disability, and/or death. My student-athlete’s ability to participate in District athletics and voluntary strength training and conditioning sessions is of such value to my student-athlete and me that I accept and assume all risks, hazards and losses related to being exposed to, contracting, and/or spreading COVID-19.

I understand and acknowledge that the District cannot guarantee any student-athlete’s safety from COVID-19 while participating in District athletics and voluntary strength training and conditioning sessions. I understand that the District has made no representations regarding the safety of participating in District athletics and voluntary strength training and conditioning sessions and that I have had the opportunity to discuss the District athletic program’s conditions prior to participation.

I agree that my student-athlete and I are personally responsible for our safety and actions while participating in athletics and voluntary strength training and conditioning sessions in the District. My student-athlete and I agree to comply with all District policies and rules, including, but not limited to, all District policies, guidelines, signage, and instructions.

WAIVER OF LAWSUIT/LIABILITY: In consideration for my student-athlete's participation in District athletics and voluntary strength training and conditioning sessions, I hereby, for myself, my student-athlete, and on behalf of my and my student-athlete's heirs, executors, administrators, successors, agents, assigns, and representatives, knowingly and voluntarily forever release, covenant not to sue, and fully waive our right to bring suit against Dupo Community Unit School District No. 196 and its board members, officers, agents, representatives, employees, insurers and all other persons in their individual and official capacities (referred to collectively as the "Released Parties") in connection with exposure, infection, and/or spread of COVID-19 related to my student-athlete's participation in District athletics and voluntary strength training and conditioning sessions. I understand that this waiver means I give up my right to bring any claims or lawsuits for injury including, but not limited to, personal injury, death, disease or property losses, damages and/or any other losses, including, but not limited to, claims of negligence and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

INDEMNIFICATION: In consideration for my student-athlete's participation in District athletics and voluntary strength training and conditioning sessions, I hereby knowingly and voluntarily agree to indemnify, hold harmless, and defend the Released Parties from and against any and all liability or present or future claims or lawsuits for injury, including, but not limited to, personal injury, death, disease or property losses, damages, and/or any other losses, whether known or unknown, **WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASED PARTIES OR OTHERS**, including claims for attorney's fees, arising out of or in any way connected with exposure, infection, and/or spread of COVID-19 related to my student-athlete's participation in District athletics and voluntary strength training and conditioning sessions.

CHOICE OF LAW: I understand and agree that the law of the State of Illinois will apply to this contract. The terms of this agreement do not limit the immunities available to the District under Illinois and federal law. I understand that this Waiver and Release is intended to be as broad and inclusive as permitted by the laws of the State of Illinois, and I agree that if any portion is held invalid, the remainder of the Waiver and Release will continue in legal force and effect.

I ACKNOWLEDGE THAT I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS WAIVER AND RELEASE AND HAVE HAD THE OPPORTUNITY TO ASK ANY QUESTIONS RELATED TO IT. I FULLY UNDERSTAND THAT BY SIGNING THIS FORM I AM GIVING UP LEGAL RIGHTS AND/OR REMEDIES THAT MAY OTHERWISE BE AVAILABLE AND I FREELY AND KNOWINGLY ASSUME THE RISK AND VOLUNTARILY WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE.

Student-Athlete Name (printed)

Parent Name (printed)

Student-Athlete Signature

Date

Parent Signature

Date