

**KINNIKINNICK COMMUNITY CONSOLIDATED SCHOOL DISTRICT 131
EXTRACURRICULAR CONSENT AND WAIVER**

I, _____, give permission and authorize my student, _____, to participate in the Kinnikinnick CCSD #131 Extracurricular **Volleyball** Program.

Acknowledgements and Assumption of Risk

By signing below, I knowingly and voluntarily assume all risks associated with my/my student's participation in the in-person **Volleyball** including potential exposure to COVID-19. I also acknowledge that Kinnikinnick Community Consolidated School District 131 cannot prevent my student from becoming exposed to, contracting, or spreading COVID-19 while participating in **Volleyball**.

Health and Safety Precautions

I recognize the importance of complying, and agree that I/my student will fully comply with District rules, procedures, and instructions relating to health and safety precautions (e.g., social distancing, face coverings, hand washing, sanitization, and temperature and symptom checks), including any guidance issued by the Illinois State Board of Education or the Illinois Department of Public Health. Any failure to comply with district rules and safety procedures during a sporting event or extracurricular activity will result in immediate dismissal from the event and possible removal from the activity permanently.

I agree that I/my student will not attend **Volleyball** if he has been tested for COVID-19, has tested positive for COVID-19, is experiencing any symptoms of COVID-19, or is a close or household contact to someone who is testing or positive for COVID-19 and acknowledge that I/my student will be sent home from the **Volleyball** if he/she displays any symptoms of COVID-19.

Release of Liability and Hold Harmless Agreement

For myself or as a parent/guardian of a student who is participating in the **Volleyball**, I recognize and acknowledge that there are certain risks, including exposure to COVID-19, that may arise from my/my student's participation. I, and my agents, representatives, assigns, heirs, and successors hereby waive, relinquish, and hold harmless, the Board of Education of Kinnikinnick Community Consolidated School District 131 ("Board"), its individual Board members, officers, administrators, employees, agents, representatives, volunteers, insurers, assigns, and successors, and each and every one of them, from and against any and all claims, demands, suits, liability, and causes of actions, whether known or unknown, past, present, or future, including exposure to COVID-19, arising out of, in connection with, or in any manner related to my/my student's participation in the **Volleyball**.

I have carefully read this Consent and Waiver and fully understand its contents. I am aware that by signing this document, I am waiving my right to sue the Board, its individual Board members, officers, administrators, employees, agents, representatives, volunteers, insurers, assigns, and successors, and each and every one of them. This Waiver is complete and signed of my own free will. I am aware that this form is a contract between myself, my student, and the Board. I further certify that I have the legal authority to sign on behalf of myself, my student, and family.

Print student name

Date

Signature of Student

Date

Print name of Parent/Guardian

Date

Signature of Parent/Guardian

Date

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