

SAN RAMON VALLEY UNIFIED SCHOOL DISTRICT

699 Old Orchard Drive, Danville, California 94526

www.srvusd.net

High School Athletics Protocols Acknowledgement and Assumption of Potential Risk Liability Form

Every participant must agree to the following:

- 1. Students must arrive with masks on and wear masks until directed by staff otherwise. They shall also have on their possession hand sanitizer such as Purell or similar product so to sanitize their hands when requested by staff or as the need arises. Adult staff must wear masks at all times.
- 2. No parents, grandparents, siblings, guests, spectators or fans may be in attendance at any practice.
- 3. Students may drive themselves to practice and;/or games with an approved on file. Students may be dropped off by their parent/guardian. Students must NOT carpool together.
- 4. Restroom use is limited to one student at a time. Hands shall be washed with soap for at least 20 seconds after each use.
- 5. Parents must ensure that students are not running a fever and are symptom free before attending a practice or game. Symptoms that negate the ability of a student to attend an activity/camp include:
 - Fever or chills
 - Cough
 - •Shortness of breath or difficulty breathing
 - Fatigue
 - Muscle or body aches
 - Headache

- •Loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list does not include all possible symptoms. Should any student exhibit these symptoms, they shall not attend the activity/camp, and the activity/camp adult leader shall immediately be notified.

- 6. Students must stay home if experiencing any symptoms described above.
- 7. Athletes participating in Outdoor moderate-contact sports (red tier) can be played in the purple tier with an adjusted case rate equal to or less than 14 per 100,000 under the following conditions:
 - Unless required as noted below, regular and postseason antigen or PCR testing of sports participants and coaches weekly while participating in Outdoor High-Contact sports is strongly encouraged. If competing, testing performed with test results made available within 24 hours of play.
- 8. Gatherings before or after practices/competition are not allowed. At the end of each practice/competition, students must immediately depart from campus.

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of allowing the below identified minor to participate in practice/competition offered by the San Ramon Unified School District and related events and activities, the undersigned acknowledges and agrees that:

- 1. I understand and acknowledge that these activities, by their very nature, pose the potential risk of serious injury/illness to individuals who participate in such activities.
- 2. I understand and acknowledge that participation in these activities is completely voluntary and as such is not required by the district for course credit or for completion of graduation requirements.
- 3. I understand and acknowledge that in order to participate in these activities, my son/daughter and I agree to assume liability and responsibility for any and all potential risks that may be associated with participation in such activities.

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- 4. I understand, acknowledge and agree that the District, its employees, officers, agents or volunteers shall not be liable for any injury/illness suffered by my son/daughter which is incident to and/or associated with preparing for and/or participating in this activity and I voluntarily assume all risk, known or unknown, of injuries/illnesses, howsoever caused, even if caused in whole or in part by the action, inaction, or negligence, of the released parties to the fullest extent allowed by law.
- 5. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
- 6. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my student's participation; and,
- 7. I willingly agree to comply with the stated and customary terms and conditions for participation regarding protection against infectious diseases. I have reviewed the most recent directives from the Centers for Disease Control (CDC), the California Department of Public Health and Contra Costa Health Services regarding the risks associated with COVID-19 exposure and safe practices to follow. If I observe any unusual or significant hazard at any time during participation of my student in an activity/camp or based on information provided to me, I will remove my student from participation in the activity/camp immediately and report it to school district officials immediately. Further, I have informed and discussed the dangers of participation and the required rules and regulations to allow participation with my student and he/she acknowledges a full understanding of such; and,
- 8. I, for myself and on behalf of my student, heirs, assigns, personal and representatives agree to defend, indemnify and HEREBY RELEASE AND HOLD HARMLESS the San Ramon Valley Unified School District, its officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.
- 9. I acknowledge that my son/daughter is in good health at this time, and fully able to participate in the activities, including activities which are strenuous in nature.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Student LAST Name:	Student FIRST Name:	Student ID Number:
Sport (Level):		
Coach's Name:		
Parent/Guardian Signature:		
Date:		
Calcad City		