



**NOXUBEE COUNTY
SCHOOL DISTRICT**

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 very contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments have, in many locations, prohibited the congregation of groups of people.

The Noxubee County School District has put in place preventative measures to reduce the spread of COVID-19; however, the **Noxubee County School District** cannot guarantee your child will not become infected with COVID-19. Further, attending that the **Noxubee County School District** athletics/activities workouts or practices could increase your child's risk of contracting COVID-19.

I affirm that my child has not been diagnosed with, demonstrated any symptoms of or has in any way been exposed to any communicable diseases (including but not limited to the virus COVID-19) within the past thirty (30) days.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child may be exposed to or infected by COVID-19 by attending **Noxubee County School District** athletic/activities workouts or practices and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of my child becoming exposed to or infected by COVID-19 at any **Noxubee County School District** athletic/activity workout or practice may result from the actions, omissions, or negligence of myself, my child, and others, including, but not limited to, **Noxubee County School District** employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child including, but not limited to, personal injury, disability, death, illness, damage, loss, claim, liability, or expense, of any kind, that my child may experience or incur in connection with my child's attendance in any **Noxubee County School District** athletic/activities workout or practice. On my behalf, and on behalf of my child, I hereby release, covenant not to sue, discharge, and hold harmless the **Noxubee County School District**, its employees, agents, and representatives, of and from the Claims, including all liabilities, actions, damages, costs, or expenses of any



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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 the **Noxubee County School District**, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any **Noxubee County School District** athletic/activity workout or practice.

Please note that the **Noxubee County School District** summer workouts and/or practices are strictly voluntary. Your child is in no way required to attend and will not face any consequences or repercussions of any kind if you choose not to allow them to attend.

Printed Student Name: _____

Parent's Signature: _____ Date: _____