

**PARTICIPATION AGREEMENT/WAIVER OF LIABILITY AND HOLD HARMLESS FOR  
COMMUNICABLE DISEASES INCLUDING COVID-19**

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Parent(s)/Guardian(s) Names: \_\_\_\_\_

Parent/ Guardian phone: Work: \_\_\_\_\_ Home: \_\_\_\_\_ Other: \_\_\_\_\_

The novel coronavirus (“COVID-19”), has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. While rules, guidance, and personal discipline may reduce this risk, the risk of serious illness and death does exist. **Bend-La Pine Schools (“District”) cannot completely mitigate the transfer of communicable diseases like COVID-19 especially when involved in sports or activities. Participation in sports or activities includes possible exposure to and illness, injury, or death from infectious diseases including COVID-19.**

**AGREEMENT:**

The undersigned student and parent/guardian, on behalf of their minor child, agree to the following conditions and stipulations regarding the health condition of student named below to participate in Bend-La Pine Schools Athletics/Activities for the 2020-2021 school year, in order to comply with the Governor of Oregon’s Covid-19 Orders.

Students in activities and athletics will not attend activity and athletic events when they are feeling unwell or are experiencing symptoms including fever (100.4 or higher) or chills, coughing/shortness of breath or difficulty breathing, excess fatigue, muscle or body aches, headache, new loss of appetite or loss of taste/smell, sore throat, congestion or runny nose, nausea or vomiting or diarrhea.

Isolation and quarantine. Students with confirmed or presumptive (symptoms leading to testing until results are received) COVID-19 should remain under home isolation for at least 10 days after illness onset and until 24 hours after fever is gone, without use of antipyretics (fever reducing drugs), and COVID-19 symptoms (cough, shortness of breath, and diarrhea) are improving. Student will agree to follow Oregon travel recommendations and self-quarantine for all out of state non-essential travel. In addition, student will agree to follow statewide social gathering limits for the level of risk in Deschutes county.

Student agrees to follow all directives from Bend-La Pine staff regarding compliance with pandemic protocols and that student will be required to leave Bend-La Pine facilities if student fails to comply with directives, become symptomatic (as described above in the criteria), or falsifies the daily certification regarding criteria for participation.

District may be required to offer on-site testing for symptomatic individuals and for those with known exposures to individuals with COVID-19. Do you give permission for Bend-La Pine Schools to test your student athlete if they develop symptoms or are known to have been exposed to individuals with COVID-19 while in attendance at a Bend-La Pine athletic practice, meeting or event? Please select one:

Yes, I allow the District to test my student athlete for COVID-19 under the above conditions

No, please do not test my student athlete for COVID-19

**WAIVER/RELEASE:**

In consideration for providing my child the opportunity to participate in sports or activities and any related transportation to and from sports or activities events, both my child and I voluntarily agree to waive and discharge any and all claims against District and release it from liability for any exposure to or illness or injury from an infectious disease including COVID-19, including claims for any negligent actions of the District or its employees or agents, to the fullest extent allowed by law, for myself, my child, our estates, our heirs, our administrators, our executors, our assignees, and our successors.

I also agree to release, exonerate, discharge and hold harmless the District, its Board of Directors, the individual members thereof, and all officers, agents, employees, volunteers, and representatives from all liability, claims, causes of action, or demands, including attorney fees, fines, fees, or other costs (e.g. medical costs) arising out of any exposure to or illness or injury from an infectious disease including COVID-19, which may result from or in connection with my child's participation in sports or activities.

I further certify and represent that I have the legal authority to waive, discharge, release, and hold harmless the released parties on behalf of myself and the above-named student.

**I certify that I have read this document in its entirety and fully understand its contents. In exchange for the opportunity to participate in the sport or activity, the above-named student and I freely and voluntarily assume all risks of such hazards and notwithstanding such, release District from all liability for any loss regardless of cause, and claims arising from the student's participation in the sport or activity.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date