

Name				Birth date		
Address				Grade Track		
School Last Fall		School Last Spring		Date Entered Ninth Grade		
I am participating in the following sports:	Fall 1	Nurse	Winter 1	Nurse	Spring 1	Nurse
	Fall 2	Nurse	Winter 2	Nurse	Spring 2	Nurse



**CIF LOS ANGELES CITY SECTION
GRANADA HILLS CHARTER HIGH SCHOOL (8681)**

**ATHLETE'S ELIGIBILITY INFORMATION AND PARENT'S CONSENT
TO PARTICIPATE IN INTERSCHOLASTIC ATHLETICS**

Current School Year

As a member of a high school team you have many responsibilities. Among them is remaining eligible or reporting your ineligibility immediately should it occur. The Rules and Regulations Governing Interscholastic Athletics states, "If a school plays an ineligible student, knowingly or unknowingly, in any athletic contest involving team sports – all contests in which the student participated must be forfeited; In individual sports – only the points which the student won must be forfeited." Summarized below are the eligibility rules which you must observe:

1. Only students who are amateurs may participate in athletic contests.
2. Students on high school teams become ineligible if they play on "outside" teams, in the same sport, during their high school season of the sport.
3. For the purpose of this rule, outside competition is prohibited from the opening contest (scrimmage) until the final contest of that sport (league, playoff, or state competition) in which that school is involved, both dates inclusive. The prohibition on playing on outside teams applies to school holidays and vacation periods which occur during the season of the sport.
4. To be eligible for an athletic contest a student must be in attendance at school for at least two class hours on the day of the contest exclusive of the lunch hour and the athletic period. A student who is currently enrolled in at least 20 semester periods of work and passed in at least 20 semester periods of work at the completion of the last regular school marking period is scholastically eligible until the completion of the current regular school marking period.
5. The legal residence of a student who represents a high school in athletics must have been in the high school district of that school when registering as an entering student. Any student who registers in a school other than the one in whose district the student legally resides is ineligible to represent that school in athletics unless attending on a permit which carries athletic privileges or on a Statement of Residence. If a Statement of Residence is on file, a student is ineligible to compete in athletics until 20 weeks of attendance have been completed in the new school.
6. Students who knowingly fail to provide complete and accurate information regarding eligibility to participate in athletics shall be declared ineligible to represent their school in any sport for one year following the date of the discovery of the offense.
7. When a bus is furnished to transport athletic teams to contests, only those participants traveling by bus will be eligible to compete. Students assigned to bus travel must return by bus.

PLEASE SIGN THE FOLLOWING AFFIRMATION: I am aware of my responsibilities and the regulations governing my participation in connection with the Interscholastic Athletic program. I will so govern myself that my association with the program will bring honor to it and my school, and I shall expect to be asked to withdraw from the activity in case I fail to do so. I agree to withdraw from the activity if requested to do so. I have read and understand the above requirements. Any attempt to circumvent the above rules will result in my being declared ineligible.

PLEASE SIGN THE FOLLOWING AFFIRMATION: I hereby grant permission for the above named student-athlete to participate in interscholastic baseball, basketball, cross country, football, golf, soccer, softball, swimming, tennis, track and field, volleyball, wrestling, cheer, dance team, drill team, and marching band including travel to and from athletic contests at other schools or locations. I have read and understand the above requirements. Any attempt to circumvent the above rules will result in my student-athlete being declared ineligible.

Student-Athlete Signature	Date	Parent Signature	Date

ACKNOWLEDGMENT OF RISK AND INFORMED CONSENT FOR INTERSCHOLASTIC ATHLETIC PARTICIPATION

We are aware that play/participation in any sport can be a dangerous activity involving MANY RISKS OF INJURY. We understand that the risks and dangers include, but are not limited to, death or paralysis, brain damage, cardiac arrest, serious injury to internal organs and to bones, joints, ligaments, muscles, tendons, and other serious injury or impairment to other aspects of the athlete's general health and well-being. We understand that the dangers and risks of participating in sport(s) also include the high cost of medical care and impairment of the athlete's future ability to earn a living, and engage in other business, social, and recreational activities. Recognizing these risks, we consent to the participation of the above named student-athlete in any sport of participation at **Granada Hills Charter High School**.

Because of the dangers of participating in interscholastic sports, we recognize the importance of following coaches' instructions regarding playing techniques, training, and other team rules, as well as obeying such instructions.

Both the applicant student and a parent or guardian must read carefully and sign. If there are any questions, contact the Athletic Director or the Administrator in Charge of Athletics at (818) 360-2361.

Student-Athlete Signature	Date	Parent Signature	Date

Birth Date

STUDENT'S NAME

ATHLETIC INSURANCE CERTIFICATE: The governing board of each school district of any kind or class shall provide insurance protection for medical and hospital expenses resulting from accidental bodily injuries in an amount of at least one thousand five hundred dollars (\$1,500) for all such services for each member of an athletic team, through group, blanket or individual policies of accident insurance from authorized insurers or through a benefit and relief association described in subparagraph (1) of subdivision (c) of Section 10493 of the Insurance Code, for injury to members of athletic teams arising while such members are being transported by or under the sponsorship or arrangements of the school districts or a student body organization thereof to or from school or other places of instruction and the place of the athletic event. *Calif. Ed. Code, Vol 1, Part 19, Chapter 2, Article 3, Section 32221 (pgs. 1004, 1005, 1006), Revised 1979, Amended 1980.* One thousand five hundred dollars (\$1,500) insurance protection for medical and hospital expenses resulting from accidental bodily injuries must be provided for each member of an athletic team by the student or his/her parents or guardians through group, blanket policies, etc., or through the insurance carrier for the District. **I certify that this student has at least \$1,500 protection for medical and hospital expenses with**

--	--

Name of Insurance Carrier

Policy or Group Number

to cover injuries incurred while participating in, practicing for, or traveling to and from extramural contests. I understand that the insurance requirement may be met by purchase of School District approved insurance coverage. **I have read and understand the rules above. I hereby grant permission for my son/daughter to participate in interscholastic athletics under these rules.**

--	--

Parent Signature

Date

CODE OF CONDUCT FOR INTERSCHOLASTIC STUDENT-ATHLETES

Interscholastic athletic competition should demonstrate high standards of ethics and sportsmanship and promote the development of good character and other important life skills. The highest potential of sports is achieved when participants are committed to pursuing victory with honor according to six core principles: trustworthiness, respect, responsibility, fairness, caring, and good citizenship ((the "Six Pillars of Character"). This code applies to all student-athletes involved in interscholastic sports in California. I understand that, in order to participate in high school athletics, I must act in accord with the following:

TRUSTWORTHINESS

- Trustworthiness* – be worthy of trust in all I do.
- Integrity* – live up to high ideals of ethics and sportsmanship and always pursue victory with honor; do what’s right even when it’s unpopular or personally costly.
- Honesty* – live and compete honorably; don’t lie, cheat, steal or engage in any other dishonest or unsportsmanlike act.
- Reliability* – fulfill commitments; do what I say I will do; be on time to practices and games.
- Loyalty* – be loyal to my school and team; put the team above personal glory

RESPECT

- Respect* – treat all people with respect all the time and require the same of other student-athletes.
- Class* – live and play with class; be a good sport; be gracious in victory and accept defeat with dignity; give fallen opponents help, compliment extraordinary performance, show sincere respect in pre- and post-game rituals.
- Disrespectful Conduct* – don’t engage in disrespectful conduct of any sort including profanity, obscene gestures, offensive remarks of a sexual or racial nature, trash-talking, taunting, boastful celebrations, or other actions that demean individuals or the sport.
- Respect Officials* – treat contest officials with respect; don’t complain about or argue with official calls or decisions during or after an athletic contest.

CARING

- Concern for others* – demonstrate concern for others; never intentionally injure any player or engage in reckless behavior that might cause injury to myself or others.
- Teammates* – help promote the well-being of teammates by positive counseling and encouragement or by reporting any unhealthy or dangerous conduct to coaches.

RESPONSIBILITY

- Importance of Education* – be a student first and commit to getting the best education I can. Be honest with myself about the likelihood of getting an athletic scholarship or playing on a professional level and remember that many universities will not recruit student-athletes that do not have a serious commitment to their education, the ability to succeed academically or the character to represent their institution honorably.
- Role-Modeling* – Remember, participation in sports is a privilege, not a right and that I am expected to represent my school, coach and teammates with honor, on and off the field. Consistently exhibit good character and conduct yourself as a positive role model. Suspension or termination of the participation privilege is within the sole discretion of the school administration.
- Self-Control* – exercise self-control; don’t fight or show excessive displays of anger or frustration; have the strength to overcome the temptation to retaliate.
- Healthy Lifestyle* – safeguard your health; don’t use any illegal or unhealthy substances including alcohol, tobacco and drugs or engage in any unhealthy techniques to gain, lose or maintain weight.
- Integrity of the Game* – protect the integrity of the game; don’t gamble. Play the game according to the rules.

FAIRNESS

- Be Fair* – live up to high standards of fair play; be open-minded; always be willing to listen and learn.

CITIZENSHIP

- Play by the Rules* – maintain a thorough knowledge of and abide by all applicable game and competition rules.
- Spirit of Rules* – honor the spirit and the letter of rules; avoid temptations to gain competitive advantage through improper gamesmanship techniques that violate the highest traditions of sportsmanship.

I have read and understand the requirements of this Code of Conduct. I understand that I’m expected to perform according to this code and I understand that there may be sanctions or penalties if I do not.

--	--	--	--

Student-Athlete Signature

Date

Parent Signature

Date

STUDENT MAY ONLY BE RELEASED TO PERSONS LISTED ON THIS CARD

EMERGENCY INFORMATION CARD				Student's ID: _____
Student's Last Name		First Name		Middle Name
Birth Date	Grade	Home Language		Home Phone
Address		City, State		Zip Code
Father/Guardian's Last Name		First Name		Mother/Guardian's Last Name
				First Name
Father/Guardian's Address			Mother/Guardian's Address	
Home Phone			Home Phone	
Work Phone			Work Phone	
Cell Phone			Cell Phone	
Email			Email	
In case of an emergency during school activities:				
Student's Cell Phone Number				

In case you are unable to reach me during any emergency, you are authorized to contact and, if necessary, release my Student to any of the following: (Student will not be released to anyone under the age of 18.)

Name	Relationship
Home phone	Cell phone
Name	Relationship
Home phone	Cell phone
Name	Relationship
Home phone	Cell phone
Name	Relationship
Home phone	Cell phone

In signing below, I verify that the information provided above is true and accurate, and that I have read the California Education Code Sections (located on the back) relating to a parent's rights and certain school activities. I understand that my student will only be released to persons listed on this card.

X Signature of Parent/Guardian

Date

AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT

The undersigned, legal custodian of, _____, a minor, hereby authorizes the executive director or designee, into whose care the aforementioned minor pupil has been entrusted, to consent to any X-ray examination, anesthetic, medical or surgical diagnosis, treatment, and/or hospital care to be rendered to said minor upon the advice of any licensed physician and/or dentist.

It is understood that this authorization is given in advance of any required diagnosis, treatment or hospital care and provides authority and power to the aforementioned agent(s) to give specific consent to any and all such diagnosis, treatment, or hospital care which a licensed physician or dentist may deem necessary.

This authorization complies with the provisions of Section 25.8 of the California Civil Code, and shall remain effective for the full school year unless revoked in writing and delivered to said agent(s). I understand that Granada Hills Charter High School, its officers and its employees assume no liability of any nature in relation to the transportation of the said minor. I further understand that all costs of paramedic transportation, hospitalization, and any examination, X-ray or treatment provided in relation to this authorization shall be borne by the undersigned.

Student's Physician Name _____

Phone _____ Ext _____

Health Insurance Provider _____

Medical Record Number/Group Number _____

Medical Problems _____

Medication Used _____

My student is allergic to the following _____

SIGNATURE OF PARENT/GUARDIAN

X

Date

FOR SCHOOL OFFICE USE ONLY		
Student released to: _____		
Relationship to Student: _____		
Address: _____		
City: _____	State: _____	Zip Code: _____
Release Date: ____/____/____ Release Time: _____: _____ AM / PM		
Employee Name and Signature: _____		

GRANADA HILLS CHARTER HIGH SCHOOL

Concussion Information Sheet

What can happen if my child keeps on playing with a concussion or returns to soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athlete will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student-athlete's safety.

If you think your child has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The new CIF Bylaw 313 now requires implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

“A student-athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time and for the remainder of the day.”

and

“A student-athlete who has been removed may not return to play until the athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider”.

You should also inform your child's coach if you think that your child may have a concussion Remember its better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to:

<http://www.cdc.gov/ConcussionInYouthSports/>

Student-athlete Name Printed

Student-athlete Signature

Date

Parent or Legal Guardian Printed

Parent or Legal Guardian Signature

Date



Granada Athletics Media Release

I hereby agree and give my permission for Granada Hills Charter High School to record, film, photograph, audiotape or videotape my name, image, likeness, spoken words, and performance, in any form (hereinafter referred to as “Works”) and to display, publish, distribute or exhibits these Works of any part thereof for the purpose of and in connection with any material that may be created by Granada Hills Charter High School including, without limitation, for posting on the Granada Hills website and/or for broadcasting on television or other media outlets.

I hereby further agree that Granada Hills Charter High School is the sole owner of all rights, title and interest, including copyrights in such Works and any parts thereof for all without limitation, reservation or compensation to me or my child.

By entering into this informed consent and release and granting the permission as stated herein, I also am releasing Granada Hills Charter High School and their respective officers, directors, agents and/or employees from and against any and all liability, loss, damage, cost, claims and/or causes of action arising out of or related to me/my son/daughter’s participation in any media events, including, without limitation, television broadcast, web broadcasts, promotional materials or website projects.

I have read this Informed Consent and Release and understand its term. I sign it voluntarily and with full knowledge of significance.

Students Name: _____ Grade: _____

Students Signature: _____ Date of Birth: _____

Parents/Guardian’s Name: _____

Parents/ Guardian’s Signature: _____

Sport: _____ Date: _____

Keep Their Heart in the Game

Recognize the Warning Signs & Risk Factors of Sudden Cardiac Arrest (SCA)

Tell Your Coach and Consult Your Doctor if These Conditions are Present in Your Student-Athlete

Potential Indicators That SCA May Occur

- Fainting or seizure, especially during or right after exercise
- Fainting repeatedly or with excitement or startle
- Excessive shortness of breath during exercise
- Racing or fluttering heart palpitations or irregular heartbeat
- Repeated dizziness or lightheadedness
- Chest pain or discomfort with exercise
- Excessive, unexpected fatigue during or after exercise

Factors That Increase the Risk of SCA

- Family history of known heart abnormalities or sudden death before age 50
- Specific family history of Long QT Syndrome, Brugada Syndrome, Hypertrophic Cardiomyopathy, or Arrhythmogenic Right Ventricular Dysplasia (ARVD)
- Family members with unexplained fainting, seizures, drowning or near drowning or car accidents
- Known structural heart abnormality, repaired or unrepaired
- Use of drugs, such as cocaine, inhalants, "recreational" drugs, excessive energy drinks or performance-enhancing supplements

What is CIF doing to help protect student-athletes?

CIF amended its bylaws to include language that adds SCA training to coach certification and practice and game protocol that empowers coaches to remove from play a student-athlete who exhibits fainting—the number one warning sign of a potential heart condition. A student-athlete who has been removed from play after displaying signs or symptoms associated with SCA may not return to play until he or she is evaluated and cleared by a licensed health care provider. Parents, guardians and caregivers are urged to dialogue with student-athletes about their heart health and everyone associated with high school sports should be familiar with the cardiac chain of survival so they are prepared in the event of a cardiac emergency.

I have reviewed and understand the symptoms and warning signs of SCA and the new CIF protocol to incorporate SCA prevention strategies into my student's sports program.

STUDENT-ATHLETE SIGNATURE

PRINT STUDENT-ATHLETE'S NAME

DATE

PARENT/GUARDIAN SIGNATURE

PRINT PARENT/GUARDIAN'S NAME

DATE

For more information about Sudden Cardiac Arrest visit

California Interscholastic Federation
<http://www.cifstate.org>

Eric Paredes Save A Life Foundation
<http://www.epsavealife.org>

National Federation of High Schools
(20-minute training video)
<https://nfhslearn.com/courses/61032>





3Rs 24/7 Code of Conduct

Student Athletes wishing to participate in Athletics at Granada Hills Charter High School must read this agreement with their Parent or Guardian and both Student Athlete and Parent must sign this agreement as a portion of the “eligibility to participate in GHCHS Athletics”.

Signing this **3Rs 24/7** Code of Conduct documents awareness and commitment to uphold the following:

- **Respect Yourself- No Drugs, Alcohol, or Steroids**
- **Respect Others- No Hazing, Bullying, or Fighting**
- **Respect Your School- No Vandalism, Tagging, or Stealing**

GHCHS is committed to pursuing an Athletic Program that supports the above principles. Participation on GHCHS sports teams is a privilege and conduct that violates the above principles endanger others and reflects negatively on GHCHS. Therefore, GHCHS has Zero Tolerance for any activity, **on or off** the campus that inflicts harm physically, mentally, or emotionally, to the individual, others, or to GHCHS.

There will be mandatory meetings for student athletes, coaches, and parents throughout the year supporting these principles and providing helpful information to help sustain the commitment to these principles on and off the field of play.

I have read, and support the **3Rs 24/7**. By signing this document, I agree to adhere to these principles. I am aware that signing this document is a requirement for Athletic Eligibility. I realize that failure to adhere to these principles may result in suspension, expulsion, and/or becoming ineligible to participate in Athletics at GHCHS. Any decision to remove a student from a team because of a violation of the 3Rs Code of Conduct is final.

Student Athlete Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____



Parent/Guardian ("Parent(s)") Assumption of Risk, Waiver of Liability, and Indemnity Agreement
Relating to Coronavirus/COVID-19
For Students Voluntarily Coming to Campus

The novel coronavirus, COVID-19, was declared a worldwide pandemic by the World Health Organization on March 11, 2020. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, in recent months federal, state, and local governments and health agencies have prohibited and/or limited the congregation of groups of people and required social distancing. At this time, these governments and agencies have determined some level of congregation may be acceptable in school settings, although they have warned that any congregation of people poses potentially significant risks associated with contracting COVID-19 even when precautions are taken to minimize these risks. In addition, the State of California has directed that in-person instruction may not occur unless the county in which the school is located has been off the State's Monitoring List for fourteen (14) days, unless a waiver has been granted by the local health officer. If you have further questions or concerns about COVID-19 risks, it is highly recommended you discuss these risks issues with your family medical providers and that you reach out to local, state, and/or national public health offices for further information.

Although public school attendance is mandatory for children in California, attendance at Granada Hills Charter ("School") is entirely voluntary because no parent is required to enroll their child in a charter school. You may always enroll your child in schools of the school district where you reside, and you often will have the opportunity to enroll your child in the schools of other local school districts under State law. While it continues to provide distance learning to its students for the 2020-21 school year, the School will be offering the opportunity for students to come to the GHC school campus for individual and small-group academic support, as well as optional, occasional in-person meetings (e.g., academic, elective, athletic or other reasons) ("On-Campus Activities"). Signing this waiver is only required if you will be coming to campus for On-Campus Activities; you are not required to sign this waiver if you are not choosing to come to campus.

Parents who are willing to assume the inherent risk that their children and other family members who come in contact with those children) may be exposed to COVID-19 by coming to campus may bring their child(ren) to campus for On-Campus Activities under certain conditions outlined below, after signing this Assumption of Risk, Waiver of Liability, and Indemnity Agreement ("Waiver"). On-Campus Activities are completely optional and no student shall receive any advantage in terms of grading or course credit for attending On-Campus Activities. Therefore, for all parents who opt to allow their Student to participate in optional On-Campus Activities, School is requiring parents or guardians complete and adhere to the below information and safety guidelines to reduce the risk or spread of infection of COVID-19.

Assumption of Risk, Waiver of Liability, and Indemnity Agreement

School is complying with guidance and taking reasonable steps to mitigate the risk of spreading COVID-19; however, there is no guarantee you or your child will not become infected with COVID-19 if you come to campus for On-Campus Activities. As the requirements and COVID-19 situation evolve, the School may modify the measures it takes. School has put in place the following measures in an attempt to reduce the spread of COVID-19:

- Participation in a on-site weekly COVID-19 testing program.
- Complete the online daily health screener prior to arriving on campus.
- Social distancing will be in place to the extent possible/practicable for the On-Campus Activities;
- Students/parents will wait outside until it is time for their On-Campus Activities;
- Protective equipment, including but not limited to face coverings, shall be worn by every person on campus;
- All persons, including all students, will be subject to temperature screening prior to On-Campus Activities commencing; Students who have COVID-19 symptoms or who have come into contact with an individual with COVID-19 or COVID-19 symptoms will be rescheduled.
- School shall limit the presence of individuals who are not partaking in On-Campus Activities.
- Campus areas will be sanitized, to the extent possible.

Please refer to our [COVID-19 School Safety Plan](#) on the GHC website for the most up to date information regarding GHC's health and safety protocols.

1. Assumption of Risk. Even with all measures taken, coming to campus for On-Campus Activities will substantially increase your and your child's risk of contracting COVID-19 as compared to those students who do not come to campus for On-Campus Activities. The School has no way to control exposure that may occur to you or your child, particularly since so many people who are COVID-19 positive are asymptomatic and may not even realize they are sick. Other students or staff at the School may be exposed through community spread of the disease at youth sports, hair salons, grocery stores, retail stores, religious observances/meetings, and numerous other locations throughout the community. Other students or staff at the School may be exposed because a family member, friend or neighbor of the student has been exposed.
2. Agreement to Abide by COVID-19 Protocols. If Student or the parent/guardian has any of the following underlying conditions, it is not advisable that they come to campus for On-Campus Activities even if they are not experiencing COVID-19 symptoms or have not tested positive due to the increased health risks that are associated with COVID-19 exposure for these groups:
 - Serious heart conditions • Chronic lung disease • Moderate to severe asthma • Severe obesity (Body Mass Index of 40 or higher) • Immunocompromised • Diabetes • Chronic kidney disease undergoing dialysis • Liver disease • Reside with a family member with these high-risk underlying conditions.

Assumption of Risk, Waiver of Liability, and Indemnity Agreement

I am providing the following information on behalf of _____ (“Student”) as of the date that I am signing this form **[please initial each paragraph]**:

____ I promise and agree that I and my child(ren) will not come to campus for On-Campus Activities if any of us have had contact with anyone confirmed with COVID-19 in the past fourteen (14) days. At any point in the future, if I have reason to believe I or Student has come into contact with someone with COVID-19, I promise and agree to immediately notify School staff and not come to campus for On-Campus Activities for fourteen (14) days.

____ I promise that before coming to campus for On-Campus Activities, I will determine if I, Student, or any members of Student’s household, are experiencing a fever (above 100.4) or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea (“COVID-19 Symptoms”). If I determine that I, Student, or any member of Student’s household, has any of these symptoms, I promise and agree to immediately notify School staff and keep Student at home for fourteen (14) days after the symptoms have stopped and will present a COVID-19 negative test confirmation prior to coming to campus for On-Campus Activities.

____ I promise and agree that I will ensure my and Student’s temperature is taken before leaving home, and I will ask Student whether they are experiencing COVID-19 Symptoms, prior to leaving home to come to campus for On-Campus Activities. I promise I will not come, and will not bring my child, to campus for On-Campus Activities if I or they have a fever (defined by the Center for Disease Control as a temperature of above 100.4) or warm to the touch or they or I are experiencing COVID-19 Symptoms.

____ I agree that I and the student will comply with all safety measures in place for the School when we are on campus for On-Campus Activities, including but not limited to participation in a on-site weekly COVID-19 testing program, completion of the online daily health screener prior to arriving on campus, wearing a face covering, washing hands or using hand sanitizer, and social distancing requirements. Please refer to our COVID-19 School Safety Plan on the GHC website for information about additional health and safety protocols.

____ I understand that there is an inherent risk of exposure and infection of COVID-19 during On-Campus Activities. I know, understand and voluntarily accept these risks.

3. Waiver of Liability. By signing this agreement, I acknowledge the extremely contagious nature of COVID-19 and that much is not yet known about this virus and its risks and voluntarily assume the risk that me, my child, and any other members of our household, may be exposed to or infected by COVID-19 by coming to campus for On-Campus Activities, and that such exposure or infection may result in personal injury, illness, permanent disability, and death to Student and/or anyone else exposed to COVID-19. I understand that in some cases one or more serious childhood inflammatory diseases may have resulted from COVID-19 exposure, and that it is unknown at this time what potentially serious lifelong health impairments or disabilities or life-threatening

Assumption of Risk, Waiver of Liability, and Indemnity Agreement

conditions might result from this or other conditions and diseases that might arise out of COVID-19 exposure as a child. I understand that the risk of becoming exposed to or infected by COVID-19 at School may result from the actions, omissions, or negligence of myself and others, including, but not limited to, School directors, officers, employees, volunteers, and other students and their families. I also understand that while School is taking steps to mitigate the risk of exposure to me and my child when coming to campus for On-Campus Activities that these steps cannot eliminate the significant risk of exposure or the significant health risks to me, Student and Student's family members as a result of exposure.

I, for myself, and on behalf of my family, Student, spouse, estate, heirs, executors, administrators, assigns, and personal representatives, voluntarily agree to assume all of the risks associated with COVID-19 and my and my child's coming to campus for On-Campus Activities and accept sole responsibility on behalf of my child, family, other children and myself for any COVID-related illness, personal injury, disability, death, damage, loss, claim, liability, or expense, of any kind, that I, my family, my child(ren) or wards may experience or incur in connection with my and my child(ren)'s coming to campus On-Campus Activities ("Claims").

4. Indemnity Agreement. On my behalf, and on behalf of my child and family, I hereby release, covenant not to sue, discharge, and hold harmless School, its directors, officers, teachers, employees, agents, and representatives, from the Claims, including all liabilities, claims, actions, damages, costs, attorney's fees or expenses of any kind arising out of or relating to any Claims. To the fullest extent permitted by law I shall indemnify School, its directors, officers, teachers, employees, agents, and representatives from and against all claims, damages, losses and expenses, including but not limited to attorneys' fees, arising out of or relating to the Claims and/or this Waiver. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of School, whether a COVID-19 infection occurs before, during, or after coming on to campus for On-Campus Activities. I have had the opportunity to review this Waiver with an attorney of my choosing and I sign here voluntarily, knowing and accepting these risks.

I have read this Assumption of Risk, Waiver of Liability, and Indemnity Agreement, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I confirm that I am signing the agreement freely and voluntarily, and intend my signature to be a complete and unconditional release of all liability to the greatest extent allowed by law.

FOR PARTICIPANTS OF MINOR AGE (UNDER AGE 18)

Assumption of Risk, Waiver of Liability, and Indemnity Agreement

This is to certify that I, as parent/guardian, with legal responsibility for this Student, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her/their personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her/their release provided above for all the Claims, and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Claims for any and all liabilities incident to my minor child's/ward's presence and/or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Student Name

Parent/Guardian Name

Parent/Guardian/ _____

Date