



WYTHE COUNTY PUBLIC SCHOOLS

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Scott L. Jefferies, Ed.D.
DIVISION SUPERINTENDENT

COVID-19 Athletics & Extracurricular Activities School Year 2021-2022 Assumption of Risk, Waiver, Release & Hold Harmless

WCPS will conduct athletic and extracurricular activities during the 2021-2022 school year. Due to continued concerns associated with COVID-19, these activities (hereinafter referred to as "Activity") will be conducted with safety protocols that adhere to the guidelines recommended at the time of each Activity. For the safety of all involved, participants in each Activity will be required to adhere to all safety and mitigation measures and will be immediately removed for non-compliance. Participation in all athletics and extracurricular activities is a privilege and not a right.

Parents/guardians and students who plan to participate in any Activity, must read, sign and submit this form before participation begins.

I and my child acknowledge that the novel coronavirus known as COVID-19 was declared a worldwide pandemic and is still a concern as it is contagious and is spread amongst individuals in close proximity. I also understand that in order to promote the safety and wellness of the WCPS school community, it is important to take responsible steps to keep students healthy. In order to participate in athletics and extracurricular activities, I and my child agree to adhere to the following measures during participation in any Activity:

- Follow all social distancing and mask requirements during participation in the Activity.
- Check temperature before arriving at any activity. If a fever is present (a temperature over 100.4 F or 38 C), my child will not attend the activity until he/she is without a fever (without medical intervention) for at least 72 hours.
- Monitor for signs of illness which could include fever, chills, cough, shortness of breath, difficulty breathing, fatigue, body aches, headache, loss of taste or smell, sore throat, congestion/runny nose, nausea/vomiting, diarrhea, flushed cheeks, rapid breathing, extreme fussiness, or any other symptoms recognized as indicators of COVID-19.
- Confirm that my child has not been in contact with any individual who has either tested positive for COVID-19 in the past 14 days or is waiting for test results. If contact has been made, my child will not participate in the Activity for 14 days (or the recommended time). My child will only return after that time if he/she is symptom free.

- Promptly pick up or have arrangements to pick up my child from any Activity should signs or symptoms of COVID-19 manifest. If this occurs, my child will not participate in the Activity until released from quarantine (if applicable) and symptom free for at least 72 hours without the use of medication (over-the-counter or prescribed).
- Follow all safety and mitigation strategies put in place by WCPS at the time of and during participation in any Activity.
- Understand that safety and mitigation strategies are subject to change at any time, and adhere to the changed strategies in order to continue participation in the Activity.

I understand that despite the precautions taken by WCPS, my child remains at risk of contracting COVID-19 during participation in any Activity. This risk is elevated depending on how much physical proximity is inherently experienced in the Activity. I voluntarily assume this risk and acknowledge that I, my family, and my child may be exposed or infected by COVID-19 as a result of participation in any Activity. I also understand the possible consequences of contracting COVID-19, including serious illness and possible death. By signing this form, I agree to assume all such risks in connection with my child's participation in any Activity.

I, on my own behalf and the behalf of my child hereby waive, release, and hold harmless the School Board of Wythe County Public Schools and its employees and agents from any and all risks, claims, causes of actions, fees, costs, and any expenses of any sort or kind from exposure to and/or infection from COVID-19 that I and/or my child assume or sustain during or related to participation in any Activity.

Participant's Name (please print): _____

Parent/Guardian Signature: _____

Student Participant's Signature: _____

Date of Signatures: _____