



**JICHS WAIVER OF LIABILITY AND HOLD HARMLESS INCLUDING  
COMMUNICABLE DISEASES INCLUDING COVID-19  
FOR EXTRACURRICULAR ATHLETIC AND/OR ACTIVITY PARTICIPATION**

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

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

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

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

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

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 proximity. While rules, guidance, and personal discipline may reduce this risk, the risk of serious illness and death does exist. **James Island Charter High School cannot completely mitigate the transfer of communicable diseases like COVID-19 especially when involved in [sport or activity]. Participation in [sport or activity] includes possible injury as well as exposure to and illness, injury, and/or death from infectious diseases including COVID-19, as well as spread from the exposed/infected participant or attendee to others.**

**I understand that participation in this Activity is not required. The Activity is voluntary and will expose my child/student to risks of injuries as well as infectious diseases such as Covid 19. I understand practices and attendances and/or sessions at this time are not mandatory. The school and coaches are well aware of and respect that families may need to choose for their child not to attend and risk exposure due to at risk persons within the family or household or other reasons. My child will be in no way penalized for not attending these voluntary practices and/or sessions.**

**I understand and accept that there remains an inherent risk that my child and/or family may still be exposed to and become infected with communicable diseases such as Covid 19 through participation in [sport or activity].**

In consideration for providing my child the opportunity to participate in [sport or activity] and any related transportation to and from [sport or activity] events, both my child and I voluntarily agree to waive and discharge any and all claims against [School] and release it from liability for any injury and/or any exposure to or illness or injury from an infectious disease including COVID-19, including claims for any negligent actions of James Island Charter High School or its employees or agents, to the fullest extent allowed by law, for myself, my child, my family to the extent I legally can, our estates, our heirs, our administrators, our executors, our assignees, and our successors. I understand and accept full legal responsibility for any spread to anyone from my child's, my family's, or my exposure due to participating in [sport or activity] or attendance at the [sport or activity].

I also agree to release, exonerate, discharge, indemnify and hold harmless James Island Charter High School, 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 injury or 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 [sport or activity]

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, including our responsibility of spread to others, and notwithstanding such, release James Island Charter High School from all liability for any loss regardless of cause, and claims arising from the student's participation in the [sport or activity] as fully set forth above.**

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Student Signature

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Date

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Parent/Legal Guardian Signature

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Date



**JICHS ACKNOWLEDGEMENT AND AGREEMENT  
FOR BEHAVIORAL STANDARD  
FOR PARTICIPATION IN EXTRACURRICULAR  
ATHLETIC OR ACTIVITY**

I \_\_\_\_\_, the parent/guardian of \_\_\_\_\_, will follow the requirements for in-person participation and/or attendance at any extracurricular athletic and activity event. I understand and acknowledge strict adherence to these standards are imperative to promote and help protect the health of my child and all participants/attendees.

I, my child, and my family, will adhere to all safety protocols, procedures, and requirements set forth for participation and/or attendance at any extracurricular athletics and/or activities including but not limited to:

- social distancing requirements (maintaining 6 feet of separation when possible)
- participate in daily temperature readings and possible questions regarding health
- mask wearing when required
- regular hand washing and sanitizing
- prohibitions against sharing water bottles
- limiting access to locker rooms

Furthermore, I represent and agree:

- I will not send my child to extracurricular athletic and activities if they are diagnosed with an infectious disease, exhibiting any signs/symptoms of COVID 19 or have been exposed to someone with COVID 19 (or presumed to have COVID 19) in the past 14 days.
- I will review symptoms with my child and monitor my child's symptoms every day that my child attends in-person activities/events.
- If my child becomes ill during any in-person activity/event, I will ensure they are picked up promptly. I will follow-up with an authorized health care provider/health department and comply with recommended quarantine or isolation as directed. If my child is ill, I understand that a release to return to in-person activity from an authorized health care provider may be required.

**Signs and Symptoms of COVID-19:**

- |   |                              |
|---|------------------------------|
| ● Fever (100.4°F or greater) or chills        | ● Muscle or body aches       |
| ● Cough                                       | ● Headache                   |
| ● Shortness of breath or difficulty breathing | ● New loss of taste or smell |
| ● Fatigue                                     | ● Sore throat                |
|   | ● Congestion or runny nose   |

- Nausea or vomiting
- Diarrhea

Students must be free of fever without the use of fever reducing medications.

JAMES ISLAND CHARTER HIGH SCHOOL VERY STRONGLY DISCOURAGES THE  
IN-PERSON PARTICIPATION OR ATTENDANCE OF ANYONE  
IMMUNOCOMPROMISED OR AMONG THE POPULATIONS IDENTIFIED AS HIGH  
RISK BY THE CDC.

**I further agree that I and my family will also follow the above requirements for in-person attendance at any extracurricular athletic and activity event. I understand and acknowledge strict adherence to these standards are imperative to promote and help protect the health of my family and all attendees. If participant or family fail or refuse to abide by any of the above, their attendance will not be allowed and such failure or refusal can be grounds for prohibition of participation in the extracurricular athletics and/or activity.**

Date: \_\_\_\_/\_\_\_\_/2020

Parent/Guardian \_\_\_\_\_ Parent/Guardian \_\_\_\_\_  
Print Name Signature

Student \_\_\_\_\_ Student \_\_\_\_\_  
Print Name Signature