

Heritage Academy Mesa Program Participation: Assumption of Risk, Waiver of Liability, Indemnification Agreement, and Release of Liability (WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19)



I hereby give permission for my scholar to participate in camps, clinics, conditioning, practices and contests at Heritage Academy, Inc. My scholar and I are familiar with, and knowingly and voluntarily accept, any and all risks associated with attending a school campus or any public venue.

The undersigned acknowledges, appreciates, and agrees that:

1. Participation in this activity is wholly voluntary and is not part of any regular school curriculum.
2. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. I understand and voluntarily assume the risk that my scholar may acquire COVID--19, and that COVID--19 may subsequently be transmitted from my scholar to me, my family and members of my household, and,
3. While instruction and reasonable supervision will be provided, the coaching staff cannot ensure my scholar's safety. Accidents and injuries occur (including but not limited to: physical contact with other individuals; contact with the ground, surfaces, fixtures and equipment; strenuous exertions, quick movements and changes of speed, which place stress on the cardiovascular, muscular and skeletal systems. Specific injury risks vary: a) minor injuries such as scratches, bruises and sprains, to b) major injuries such as eye injuries or loss of sight, joint injuries, limb injuries, head injuries, back injuries, heart attacks, heat stroke and concussions, to c) catastrophic injuries including paralysis and death) and it is impossible to eliminate the risk that my scholar will suffer an injury or illness, and
4. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES of others, and assume full responsibility for my participation; and,
5. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
6. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Heritage Academy their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I further agree not to sue the Released Parties, and to defend and indemnify the Released Parties for all claims, damages, losses or expenses, including attorneys' fees, if a suit is filed concerning an injury, illness, or death to me, my child or my household members resulting from participation.

I certify that my scholar is in good health, has no fever, and has no current issues that make it unsafe for my scholar to participate in activities which may not have a medical professional on staff. **I will notify the school and not send my scholar to participate if my scholar develops a fever or illness or tests positive for COVID--19.** I acknowledge that my scholar and I are responsible for ensuring that my scholar takes any necessary medication, and for avoiding any allergies. In the event of a medical emergency, 911 will be called and I will be responsible for any and all costs of medical treatment.

Scholar First and Last Name (Printed) _____

Scholar Signature _____

Parent/Guardian Name (Printed) _____

Parent/Guardian Signature _____

Date _____