



Covid-19 Activities/Sports Participation 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 Crook County School District Activities/Sports beginning June 12, 2020, in order to comply with the Governor of Oregon's Covid-19 Orders.

In order to be eligible to participate in Activities/Sports, student must comply with the following criteria for participation. Student will not attend Activities/Sports unless student meets the following criteria:

- No temperature above 100.4 within the prior 72 hours
- Not taken any fever reducing medication within the last 72 hours
- No close contact with anyone being tested/diagnosed with Covid-19 within the last 14 days
- No congestion/runny nose
- No sore throat
- No shortness of breath/difficulty breathing
- No nausea/vomiting
- No excessive fatigue/tiredness
- No muscle/body aches
- No loss of taste or smell

Student agrees to follow all directives from Crook County School District staff regarding compliance with pandemic protocols and that Student will be required to leave Crook County School District 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.

The undersigned understands that despite all precautions taken by Crook County School District regarding Covid19 protocols, that Student may be at risk for contracting Covid19 by participating in Activities/Sports. The undersigned hereby releases, discharges, and agrees to indemnify and hold harmless the Crook County School District, their employees, agents, board members, volunteers, successors, and assigns, from all claims, lawsuits, damages and demands whatsoever, including defense costs, arising out of, or in connection with Student's participation in Activities/Sports, including Covid19 exposure/infection.

I have read the foregoing, fully understand the contents, and agree to the conditions and stipulations above.

Student printed name: _____
Student signature: _____
*Age of Student: _____
Parent/Guardian/Student over 18 printed name: _____
Parent/Guardian/Student over 18 signature: _____
Parent/Guardian/Student over 18 Mailing address: _____
Email: _____
Phone number: _____
Date: _____

*If the student participating in the Crook County School District Activities/Sports is above age 18, parent/guardian signature is not required and Student must sign representing that they understand fully the contents of this participation agreement and hereby consent to the foregoing.