

**Deer Valley Unified School District  
Waiver, Release, and Assumption of Risk Form**

On behalf of myself, my household members, and as parent and lawful guardian of my minor child, \_\_\_\_\_, I hereby give permission for my child to participate in athletic activities located at one of the five Deer Valley Unified School District high schools (Barry Goldwater, Boulder Creek, Deer Valley, Mountain Ridge, Sandra Day O'Connor) My child and I are familiar with, and knowingly and voluntarily accept, any and all risks associated with athletic activities on a school campus. I acknowledge that my child's participation in this program is wholly voluntary and is not part of any regular school curriculum.

I specifically assume all risks and hazards associated with my child's participation in athletic activities including, but not limited to, the risks associated with the novel COVID-19 or similar type virus. I understand that my child will be associating with staff, volunteers, and other children and may contract COVID-19, and other viruses and diseases, through my child's participation in athletic activities. To minimize risk of exposure to COVID-19, DVUSD staff will follow the best practices recommended by federal, state and county health officials. I understand, however, that these precautions are not nearly adequate to prevent the spread of COVID-19 given, among other things, the relatively long incubation period, and the fact that many infected persons are asymptomatic. I understand and voluntarily assume the risk that my child may acquire COVID-19, and that COVID-19 may subsequently be transmitted from my child to me, my family, and members of my household.

While reasonable supervision will be provided, activities staff/volunteers cannot ensure my child's safety. Accidents and injuries happen, and it is impossible to eliminate the risk that my child will suffer an injury or illness.

I certify that my child is in good health, has no fever, and has no current issues that make it unsafe for my child to participate in athletic activities, which may not have a medical professional on staff. I will notify the school and not send my child to athletic activities if my child develops a fever or illness or tests positive for COVID-19.

To the fullest extent permitted by law, I hereby agree to waive, release, and discharge any and all claims, causes of action, damages, and rights of any kind, including serious injury or death, against athletic activities, the school where my child attends, the Deer Valley Unified School District, its insurers, the district's governing board, and all of their respective employees, agents, representatives, and volunteers (the "Released Parties") arising from or relating in any way to my child's participation in athletic activities. Including but not limited to exposure to the COVID -19 virus as we are assuming that risk.

Parent/Guardian Name (Printed) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_