

## WAIVER AND RELEASE FROM LIABILITY

The undersigned acknowledges for himself/herself and their student that participation in athletics at St. Xavier High School ("St. X") is completely voluntary. Further, the undersigned acknowledges that he/she has discussed with the student the risks of being exposed to COVID-19 by voluntarily participating in St. X athletics whether on campus or at other locations, and that he/she and the student nevertheless freely choose to allow such participation and hereby assume any and all risk that the student and/or the undersigned may be exposed to COVID-19 at any St. X athletic event and/or practice, team meeting or any other gathering sponsored by or under the supervision of St. X.

The undersigned further acknowledges that as a result of exposure to COVID-19 at any of the above-described athletic events or gatherings, I or my student may suffer illness, personal injury, disability, pain and suffering, death, damages and/or losses. **I, INDIVIDUALLY AND ON BEHALF OF MY STUDENT, HEREBY FREELY, VOLUNTARILY AND EXPRESSLY WAIVE, RELEASE, DISCHARGE, INDEMNIFY AND AGREE NOT TO SUE ST. X, ITS EMPLOYEES, REPRESENTATIVES OR AGENTS, AND HOLD THEM HARMLESS FROM ANY NEGLIGENCE ON THE PART OF ST. X, ITS EMPLOYEES, REPRESENTATIVES AND AGENTS CAUSING ANY ILLNESS, PERSONAL INJURY, DISABILITY, PAIN AND SUFFERING, DEATH DAMAGES, LOSSES, CLAIMS, ACTIONS, DAMAGES, COSTS OR EXPENSES RESULTING FROM EXPOSURE TO COVID-19 WHICH MAY ARISE, DIRECTLY OR INDIRECTLY, FROM THE STUDENT'S PARTICIPATION IN ANY ST. X ATHLETIC PROGRAM.**

I have had a reasonable opportunity to read and understand this Waiver And Release From Liability and consult with legal counsel or have voluntarily waived my right to do so. I knowingly and voluntarily agree to be bound by all of the terms set forth herein.

STUDENT'S NAME: \_\_\_\_\_

PARENT(S)/LEGAL GUARDIAN(S) NAMES: \_\_\_\_\_

Print Name

\_\_\_\_\_

Print Name

PARENT(S)/LEGAL GUARDIAN(S) SIGNATURES: \_\_\_\_\_

\_\_\_\_\_

DATE: \_\_\_\_\_