

IRVINE UNIFIED SCHOOL DISTRICT

PERMISSION/RELEASE AND WAIVER OF LIABILITY Athletic Participation

I hereby give permission for my child,	
[Child's Name]	
to participate in athletic activities at [School's Name]	
that involve participation in supervised athletic training and competition, including but not limphysical sanctioned activities, regardless of whether or not such activities are a part of the formal athletic	
I have read and understand the Irvine Unified School District's Reopening Guidelines for Athletic description of the athletic program. I fully understand and accept the inherent physical risks that my child's participation in the program and further understand that no type of medical insurance be provided by the Irvine Unified School District. I further understand that medical insurance available through Myers-Stevens & Toohey - contact your school's athletic office for further is agree to be fully responsible for my child's participation in the athletic program, and that my child rules and requirements governing conduct during the program. It is understood that if determined to be in violation of any rules and/or requirements, my child may be removed from the	may exist by coverage will e coverage is information. I ld must obey my child is
I hereby release and fully discharge the Irvine Unified School District, its Governing Boa officers, and employees from any and all liability arising out of or in connection with my child's pathe above-described athletic program. Liability means all claims, demands, losses, causes of actividigments of any and every kind that I, my child, heirs, executors, administrators or assigne against the Irvine Unified School District because of any death, personal injury or illness, or be loss or damage to property, that arises out of or occurs during my child's participation in the aboprogram.	articipation in tion, suits, or es may have ecause of any
I further agree that the foregoing release and waiver of liability is intended to be as broad and in permitted by the laws of the State of California, and that if any portion thereof is held invalid, it is a remaining terms of this release and waiver of liability shall, notwithstanding, continue in full legal for I have read, fully understand and agree to all terms of this Permission/Release and Waiver of Liability	greed that the ce and effect.
I have been notified of the Reopening Guidelines for Athletics. I understand that I have an obligation to keep my child home if they have any COVID-19 symptoms. I understand that it is the recommendation for vulnerable individuals not to participate in any workouts at this time. I further understand it is my responsibility to contact the coach and the school administration if my child or a member of our household test positive for COVID-19.	
Print Name and Signature of Parent/Guardian Date Dat	te
I understand that it is my responsibility, as a student athlete, to abide by the COVID-19 guidelines and other health and safety protocols at all times. In addition, I understand that should I fail to comply with the guidelines I jeopardize my ability to participate on my school's athletic team.	
Print Name and Signature of Student	