



Clayton County Public Schools

1058 Fifth Avenue • Jonesboro, Georgia 30236 • (770) 473-2700

DR. MORCEASE J. BEASLEY
Superintendent of Schools

CCPS SUMMER 2020 RETURN TO PARTICIPATION Release of Liability/Waiver PLEASE READ ENTIRELY BEFORE SIGNING

IN CONSIDERATION OF my child/ward _____
being allowed to participate in the Summer 2020 Athletics/Co-Curricular Programs for the Clayton County Public Schools and its related events and activities, the undersigned acknowledges, appreciates, and agrees that:

The risks of injury and illness (ex: communicable diseases, such as influenza, tuberculosis, pneumonia, hepatitis and COVID-19) to my child from the activities involved in these programs are significant and may sustain physical injury or illness (minimal, serious or catastrophic) in connection with his/her participation and interaction with other students, including the potential for permanent disability and death, and while particular rules, equipment, and personal discipline may reduce these risks, the risks of serious injury and illness do exist; and, the risk to have contact with individuals, who have been exposed to and/or have been diagnosed with one or more communicable diseases, including but not limited to COVID-19 or other medical conditions, diseases, or maladies does exist, and it is impossible to eliminate the risk that I could be exposed to and/or become infected through contact with or close proximity with an individual with a communicable disease. Therefore,

1. I, for myself and on behalf of my child/ward, heirs, assigns, representatives and next of kin, knowingly and freely assume all such risks, both known and unknown, and full responsibility for my child's participation; and
2. I, for myself and on behalf of my child/ward, heirs, assigns, personal representatives and next of kin, hereby release and hold harmless the Clayton County Board of Education, Clayton County Public Schools; its directors, officers, officials, agents, employees, volunteers, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the program or event ("Releasees"), with respect to any and all claims for personal injury, illness, disability, death, or loss or damage to person or property related to my child's involvement or participation in these programs, whether arising from the negligence of the Releasees or otherwise, to the fullest extent permitted by law.
3. I further understand that the Clayton County Public Schools has established rules and regulations pertaining to conduct, behavior, activities, health/hygiene and the safety/wellbeing of all students by which my child must abide during participation in this program, and that my child and I will be responsible for his/her failure to abide by these; and

4. I willingly agree to comply with the program's stated and customary terms and conditions for participation. If I observe any unusual significant concern in my child's readiness for participation and/or in the program itself, I will remove my child from the participation and bring such attention of the nearest official immediately; and,
5. I, the parent/guardian, assert that I have explained to my child/ward: the risks of the activity, his/her responsibilities for adhering to the rules and regulations, and that my child/ward understands this agreement.

I, FOR MYSELF AND ON BEHALF OF MY CHILD/WARD, HEIRS, ASSIGNS, PERSONAL REPRESENTATIVES AND NEXT OF KIN, DO HEREBY GRANT PERMISSION FOR MY CHILD TO PARTICIPATE IN THE SUMMER 2020 ATHLETICS/CO-CURRICULAR PROGRAMS FOR THE CLAYTON COUNTY PUBLIC SCHOOLS. I FURTHER HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND IT AND ITS TERMS, ALONG WITH THE RISK, AND ACKNOWLEDGE THAT WE ARE GIVING UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of Child/Ward: _____

Name of Parent/Guardian (if student under 18): _____

Parent/Guardian Signature (if student under 18): _____

Signature of Child/Ward (if student over 18): _____

Date Signed: _____