



Assumption of Risk and Waiver of Liability Relating to Coronavirus/Covid-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. The Kentucky Middle School Football Association ("KYMSFA") cannot guarantee that you or your child(ren) will not become infected with COVID-19 through attendance or participation in any events.

Further, attending any KYMSFA (tryout, games, practices, etc.) between 10/01/2020 - 6/30/2021 put on by the KYMSFA *could increase you and your child(ren)'s risk of contracting COVID-19 (collectively "Event")*.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily/knowingly assume the risk that my child(ren) and/or I may be exposed to or infected by COVID-19 by attending the Event put on by the KYMSFA and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Event may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Event location employees, KYMSFA volunteers, and program participants and their families. I knowingly and voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any illness to my child(ren) and/or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at and/or participation in the Event ("Claims").

On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the KYMSFA, its officers, directors, volunteers, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the KYMSFA, Event facility employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any KYMSFA Event.

DATE: _____ PARTICIPANT PRINTED NAME: _____

PARTICIPANT SIGNATURE: _____ PARTICIPANT GRADE: _____

PARTICIPANT SCHOOL/TEAM: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

PARENTAL CONSENT (To be filled out if participant is under the age of 18)

The undersigned ("Parent"), parent of _____ ("Player"), hereby consent to affirm, and, on behalf of Player, agree to be bound by the KYMSFA Assumption of Risk and Waiver of Liability Relating to Coronavirus/Covid-19 Form attached hereto which has been signed by Subject.

DATE: _____ SIGNATURE: _____

NAME AND RELATIONSHIP TO PLAYER: (please print) _____

PHONE: _____ E-MAIL: _____