

ELK GROVE UNIFIED SCHOOL DISTRICT
STUDENT BEHAVIORAL EXPECTATIONS AND
PARENT WAIVER AND RELEASE FORM FOR
2020-21 SCHOOL YEAR GIRLS VOLLEYBALL

FOR STUDENTS:

I, _____ (Printed Name of Student) agree to abide by the following behavioral expectations, which I have reviewed prior to engaging in the ELK GROVE UNIFIED SCHOOL DISTRICT 2020-21 MONTEREY TRAIL GIRLS VOLLEYBALL PROGRAM

- 1) I will minimize any and all physical contact with other athletes or coaches to the best of my ability during these sessions. I understand that some activities require more physical contact than others and for the duration of those activities I will minimize any and all physical contact when not actively participating in such high-contact activities.
- 2) I understand and will ensure that equipment is used by a single athlete per training session and no equipment may be shared (e.g. balls, weights, sleds, etc.). I understand that some activities require the sharing of equipment and such activities are the only instances where equipment may be shared.
- 3) I understand all activities must be outside, except as otherwise indicated by coaches, and I will follow instructions from coaches on available use of restroom facilities.
- 4) I will maintain a minimum of 6 feet of physical distancing from students and coaches at all times; I understand 10 feet or more is preferred. I understand that some activities will require me to be in close contact with other participants. When close contact is not required for those activities I will abide by the physical distancing requirements.
- 5) I will wear a face covering when I am not participating in an activity or session.
- 6) I understand all sessions and activities are optional and I assume the risk for participating in them. I understand I will not be penalized for non-participation.
- 7) I understand that if I experience any COVID-19 related symptoms, I will not attend and I will immediately remove myself from any activity upon experiencing any such symptoms. This includes fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headaches, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea, etc. I understand that if I exhibit these symptoms or pretend to exhibit these symptoms, I will be sent home.
- 8) I will not loiter around campus before or after sessions. I will arrive and depart as close to the session's starting and ending time as possible.
- 9) I will arrive dressed for activities and understand locker rooms will not be available.
- 10) I understand members of my immediate household may attend events for the strict purpose of age appropriate supervision. All other observers and participants will be limited to athletes and coaches.
- 11) I understand I am encouraged to shower at home before and after sessions.
- 12) I understand that my transport to and from activities is encouraged to be provided by, and limited to, those in my immediate household.
- 13) I recognize that I need to bring my own hydration products as shared water bottles are not allowed.
- 14) I acknowledge that I may be required to undergo regular and postseason antigen or PCR testing weekly while participating in high-contact activities.
- 15) I acknowledge that these expectations may change based on state and county health guidelines and related protocols. I agree to adhere to these expectations as they may be modified.

Signature _____

Date _____

FOR PARENTS:

As the parent/guardian of the above-named child and on behalf of myself and my child, agents, heirs, and successors, I voluntarily agree to and provide my informed consent to: (1) assume all risks of injury, illness, or death to my child arising out of or resulting from my child's participation in and/or attendance at the above-stated program or activity, such risks to include but are not limited to, injury, illness, or death due to being exposed to or infected by contagious diseases, including COVID-19 (also referred to as 2019 Novel Coronavirus, 2019-nCoV, SARS-Cov-2, and any other derivatives or mutations); (2) acknowledge that my child's participation in the above-stated program or activity is voluntary and I assume full responsibility for my child's participation (3) waive and release all claims, causes of actions, actions, liabilities, and costs against the ELK GROVE UNIFIED SCHOOL DISTRICT and its governing board and members thereof, officers, employees, agents, and volunteers (collectively District Personnel) and hold harmless the District and District Personnel from any claims, causes of actions, actions, liabilities, and costs that may arise out of or result from my child's participation in or attendance at such program or activity; (4) assume all obligations for any medical, financial, and other costs and/or liabilities that be sustained or incurred by my child, myself, or my agents, heirs, and/or successors; and (5) acknowledge this waiver and release is made notwithstanding section 1542 of the California Civil Code which provides: "A general release does not extend to claims which the creditor does not know or suspect to exist in his or her favor at the time of executing the release, which if known by him or her must have materially affected his or her settlement with the debtor" and therefore, I expressly waive the benefits of this provision. The District assumes no responsibility and shall not be liable for any injury, illness, death, liabilities, damages, or costs that my child, myself, my agents, heirs, and/or successors may sustain or incur arising out of or resulting from the aforementioned program or activity.

Printed Name: _____ Signature _____

Date _____