

## WAIVER AND RELEASE OF LIABILITY

**This Waiver and Release of Liability** is an agreement by and between the parent or legal guardian listed below, hereafter referenced in the first person "I", and Lebanon School District 9 ("School District").

**BACKGROUND:** While medical knowledge is evolving, it appears that COVID-19 can be spread by both physical contact and airborne droplets. It also appears that people can be infected but show no symptoms, potentially--unknowingly--spreading the virus. The exact methods of transmission and infection are unclear. Tragically, while there is no cure or vaccine, COVID-19 may cause serious, life-threatening illness and death for persons of all ages. COVID-19 may also cause long-lasting medical complications for those who recover.

**ASSUMPTION OF RISK:** I have read and understand the possible consequences to me, my child(ren) and family of contracting COVID-19. However, my child(ren)'s participation in school practices and games is of such value and importance that I accept the risk of exposure to and contraction of COVID-19 and the consequences for me, my children and family.

**WAIVER OF CLAIMS AND RELEASE OF LIABILITY:** As consideration for permitting my student(s) to participate in open gyms, school practices, and games, I hereby forever release from any liability, and waive my right to bring any claim or suit against, the School District, its Board of Education, its employees, agents and volunteers in connection with, or related to, exposure, infection or spread of COVID-19 resulting from participation in open gyms, practices, and games that are coached, supervised or sanctioned by School District employees. This waiver and release of liability will survive my death and will apply to my heirs.

**I have carefully read this Waiver and Release of Liability and understand that by signing, I give up any right to bring a claim or lawsuit seeking damages for personal injury, death, disease, property loss or any other loss, including but not limited to, claims of negligence and claims for which the School District and its employees do not have tort immunity under Illinois law.**

Name of Student(s): \_\_\_\_\_

I am the parent or legal guardian of the minor student named above. **I hereby accept the terms and conditions of this Waiver and Release of Liability.**

Signature: \_\_\_\_\_  
Name: (printed) : \_\_\_\_\_

Date: \_\_\_\_\_

**The undersigned on behalf of the School District accepts the terms and conditions of this Waiver and Release of Liability.**

Signature: \_\_\_\_\_  
Name (printed) and position : \_\_\_\_\_

Date: \_\_\_\_\_