

**SCHOOL CITY OF HOBART  
AGREEMENT RELATED TO COVID-19  
FOR ON-SITE SCHOOL ACTIVITIES**

The student and/or parent named below has requested permission to participate in on site activities sponsored by the School City of Hobart. For the purposes of this Agreement activities include, but are not limited to curricular, co-curricular and extra-curricular events or instruction, practices, training sessions, jamborees, meetings, games, tournaments, any other competitive endeavor, engaging in projects, any related School City of Hobart transportation to and from the foregoing, and entering and remaining in premises leased or owned by School City of Hobart at the time when the activity is being held (collectively, "Activity").

I hereby acknowledge, affirm and agree to the following:

1. I am familiar with the Centers for Disease Control and Prevention ("CDC") guidelines regarding the Novel Coronavirus Disease ("COVID-19"). I acknowledge and understand that the circumstances and symptoms regarding COVID-19 are changing from day to day and that, accordingly, the CDC guidelines are regularly modified and updated, and I agree to accept full responsibility for familiarizing myself with the most recent CDC modifications and updates.
2. I affirm that neither I, nor any person residing in my household, have been diagnosed with, demonstrated any symptoms of, or have in any way knowingly been exposed to COVID-19, within the past fourteen (14) calendar days. I further affirm that I have not been notified within the past fourteen (14) calendar days that I, nor any person residing in my household, has been exposed to COVID-19.
3. I agree that if I, or any person residing in my household, begin to experience symptoms similar to COVID-19, or if I, or any person residing in my household, are notified that I/they have been exposed to or infected with COVID-19 that I will immediately cease participating in the on-site Activity. Furthermore, if I, or any person residing in my household, are notified that I/they have been diagnosed with COVID-19 and I have participated in the Activity within the last fourteen (14) calendar days from the date of diagnosis, that I will immediately notify the School City of Hobart of the diagnosis.
4. I acknowledge that I am aware that by participating in the Activity that there is a risk of being exposed to COVID-19, and/or any mutation or variation thereof. I am also aware that such an exposure can occur either directly or indirectly whether or not a mask and/or gloves are worn and that School City of Hobart cannot guarantee that by participating in the Activity on-site that there will be no exposure to COVID-19. I further acknowledge that while certain individuals are more susceptible to becoming seriously ill if they contract COVID-19 (such as people over 65, people with serious underlying health conditions, and those with compromised immune systems), anyone, including a healthy person, is susceptible to contracting COVID-19. I have independently evaluated and reviewed the risks of being exposed to or infected by COVID-19 and have determined to participate in the Activity on-site with full knowledge and acceptance of the risks.
5. I understand and acknowledge that School City of Hobart cannot eliminate the risk of exposure to COVID-19 and by signing this agreement, I fully and knowingly agree to ASSUME ALL RISKS associated with participating in the Activity on-site and the exposure to or the infection of COVID-

19, including any risk of illness, bodily injury, permanent disability and/or death related, directly or indirectly, to COVID-19.

6. I acknowledge that the School City of Hobart has made me aware of the various options available to me by which the state compulsory education requirement may be satisfied, including e-learning, and that I have considered the degree of risk of infection associated with each option, and have decided how to proceed taking this information into consideration.
7. I acknowledge that minimizing risk of infection imposes certain restrictions on the activity of students, and I have discussed with my child or children the importance of social distancing and personal hygiene as it relates to controlling this risk, and agree to work with the School City of Hobart to encourage responsible behavior by any students in my home.
8. I acknowledge and fully assume the risk of illness and death related to COVID-19 arising from the child's participation in on-site school activities. I understand that contact sports entail an increased risk due to close contact and absence of protective barriers. I HEREBY RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE, the School City of Hobart, its board of trustees, administrators, teachers, staff, coaches agents and other representatives from any liability related to COVID-19 which might occur as a result of my child's participation in on-site school activities, or their cancellation due to the virus.
9. To the maximum extent allowed by law, I hereby agree to, INDEMNIFY AND HOLD HARMLESS the School City of Hobart from and against any and all claims, demands, suits, judgments, losses or expenses of any nature whatsoever (including, without limitation, attorneys' fees, costs and disbursements, whether of in-house or outside counsel and whether or not an action is brought, on appeal or otherwise), arising from or out of, or relating to, directly or indirectly, my exposure to or the infection of COVID-19, or arising from or out of, or relating to, directly or indirectly, me exposing or infecting others with COVID-19.
10. I agree that this **agreement** is to be binding upon my spouse, children, heirs and assigns, and that the provisions contained herein shall be construed, interpreted and controlled according to the laws of the State of Indiana

**IN SIGNING THIS AGREEMENT, I ACKNOWLEDGE AND REPRESENT THAT I have read the AGREEMENT, understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements, apart from the foregoing written Agreement, have been made.**

I, the undersigned parent/legal guardian, certify that I am the parent/legal guardian of the above named student, who is a minor child, and that I am requesting that my minor child be able to participate in the Activity on-site and that I agree, on my own behalf and on behalf of my minor child, including my and/or the minor child's representatives, executors, administrators, heirs and assigns, that I am bound, and that my child, is bound by each and every term of this agreement.

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Print Parent/Legal Guardian Name

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Parent/Legal Guardian Signature

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Date

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Print Student Name