



**WAIVER OF LIABILITY AND HOLD HARMLESS FOR COMMUNICABLE  
DISEASES INCLUDING COVID-19**

Student Name: \_\_\_\_\_

Grade: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Parent(s)/Guardian(s) Names: \_\_\_\_\_

Parent/ Guardian phone: Work: \_\_\_\_\_ Home: \_\_\_\_\_ Other: \_\_\_\_\_

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. While rules, guidance, and personal discipline may reduce this risk, the risk of serious illness and death does exist.

Little Wound School cannot completely mitigate the transfer of communicable diseases like COVID 19, especially when involved in a school related activity. Participation in school related activities includes possible exposure to and illness, injury, or death from infectious diseases including COVID-19. Little Wound advises parents of those students who live with elders, or family members considered “at-risk”, to consider this in your decision for your student to participate on campus during fourth quarter school activities.

In consideration for providing my student the opportunity to participate in fourth quarter activities and any related transportation to and from school related activity or event, both my student and I, voluntarily agree to follow the guidelines to participate in school related activities, waive and discharge any and all claims against Little Wound School and release the school from liability for any exposure to or illness or injury from an infectious disease including COVID-19, including claims for any negligent actions of Little Wound School or its employees or agents, to the fullest extent allowed by law, for myself, my child, our estates, our heirs, our administrators, our executors, our assignees, and our successors.

I also agree to release, exonerate, discharge, and hold harmless Little Wound School, the individual members thereof, and all officers, agents, employees, volunteers, and representatives from all liability, claims, causes of action, or demands, including attorney fees, fines, fees, or other costs (e.g. medical costs) arising out of any exposure to or illness or injury from an infectious disease including COVID-19, which may result from or in connection with my child’s participation in school related activity.

I certify and represent that I have the legal authority to waive, discharge, release, and hold harmless the released parties on behalf of myself and the above-named student.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date