

## De Soto 73 School District Activities COVID-19 Waiver

Dear De Soto 73 Parents, Staff and Community:

The risks of COVID-19 are real and ongoing. Participating in athletics and activities carries with it the risk to have contact with individuals who have been exposed to and/or have been diagnosed with an infectious disease. While it is impossible to eliminate the risk that a student could be exposed to and/or become infected, the De Soto School District will attempt to mitigate those risks when possible. Students and parents are reminded that participation in athletics and activities is voluntary. Additionally, off-season and summer workouts, practices, camps, etc. are voluntary on the part of the student and are not required, directly or indirectly, for membership on a school team. Therefore, it is understood that each family will decide for itself whether or not their student will participate in summer workouts, practices, camps, etc. and to what extent their student will participate. Should families decide that their student will participate in summer workouts, practices, camps, etc., the following **guidelines** have been put in place:

### **SCREENING**

1. Parents must agree to screen their children daily for indicative symptoms of COVID-19 and agree they will not allow their child to participate any day that they are symptomatic. This is a crucial step in mitigating the spread of the virus. If the answer to any of the following questions is 'yes' he/she should be kept home:

- Do you have a temperature higher than 100.4 Fahrenheit?
- Do you have a household or close contact with someone who has been diagnosed with COVID-19 in the past two weeks?
- Do you have symptoms of lower respiratory illness such as a new or worsening cough, shortness of breath, or difficulty breathing?
- Have you experienced any chills or repeated shaking with chills?
- Have you experienced any muscle pain or headache (different than normal exercise-induced pain or your seasonal allergies or other diagnosed condition)?
- Have you experienced any sore throat (different than your seasonal allergies or other diagnosed condition)?
- Have you experienced any recent loss of taste or smell?
- Have you experienced any recent diarrhea or vomiting?

2. If a student answers yes to any of these questions on a daily screening, they cannot attend any activity that day. Students will not be allowed back until a subsequent day when they do have a negative screen, have documentation demonstrating the SARS-CoV-2 test was negative, or a note from their healthcare provider indicating they do not need to be tested and their symptoms are not due to COVID-19.

3. It is solely the parent/guardian's responsibility to screen their children daily for indicative symptoms of COVID-19 and keep them home if they are not well.

### **GENERAL SAFETY GUIDELINES FOR STUDENTS:**

1. Athletes should utilize good general hygiene, including frequent, effective hand washing, no spitting, covering the mouth when coughing or sneezing, no sunflower seeds, and avoiding touching of the face.
2. Athletes should bring their own water bottle, clearly marked with their name, and it should not be shared with others. Shared drinking sources (water fountains) will not be used.

3. Athletes should refrain from pre-practice gatherings of players or celebratory contact (hugs, handshakes, high fives, fist bumps, etc.).
4. Athletes should arrive as close as possible to when the activity begins and leave as soon as the activity ends.
5. There will be no shared athletic equipment (towels, clothing, shoes, gloves, helmets, etc.).
6. Individual drills requiring the use of athletic equipment are permissible, but the equipment will be cleaned prior to use by the next individual or group.
7. Athletes should avoid touching gates, fences, benches, etc. when possible.
8. Athletes should arrive dressed and ready for practice, take all gear home, and clean gear daily. Locker rooms will not be available.
9. Athletes should observe social distancing as much as possible.
10. Athletes should notify their coach of any signs or symptoms of COVID-19 they detect during practice. The athlete will be isolated until they can be sent home and the family should contact their healthcare provider.
11. Athletes are allowed to wear Personal Protective Equipment (PPE) items if they choose, as long as the items do not compromise the safety of participants in the game or violate the rules of the game.

#### **ACKNOWLEDGEMENT**

- I acknowledge that federal and state government officials have declared that there currently exists a public health crisis in our country related to the Coronavirus Disease 2019 (“COVID-19”).
- I confirm that I will not permit my child to participate in the program or activity if, at any time during the program or activity, my child is showing any symptoms of COVID-19 (including but not limited to fever, dry cough, fatigue, shortness of breath, chills, muscle pains). Additionally, I confirm that I will not permit my child to participate in the program or activity if, at any time during the program or activity, my child has been in contact with any individual diagnosed with COVID-19 or any individual currently waiting for test results confirming the possibility of a COVID-19 diagnosis. I agree that in such situations, my child will be unable to participate in the program or activity until: (i) 14 calendar days after the symptoms first appeared and my child is no longer showing any symptoms; or (ii) a healthcare provider has confirmed in writing that my child has tested negative for COVID-19 or that my child’s symptoms were not due to COVID-19.
- I understand that the De Soto School District cannot prevent the possible transmission or contraction of COVID-19 for my child.

The undersigned agrees to release, discharge, hold harmless and indemnify the De Soto School District, its agents, employees, officers, Board of Education members, insurers and others acting on the District’s behalf (the “Releasees”), of and from any and all claims, demands, causes of action and/or legal liabilities for injuries to or death of my child occurring during, or resulting from, or participation in the above-mentioned program or activity and related in any way to COVID-19, even if the cause, damages or injuries are alleged to be the fault of or alleged to be caused by the negligence or carelessness of the Releasees.

Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_