Public Schools of Petoskey

Every Opportunity.

NOTICE AND WAIVER TO ALL VOLUNTARY ACTIVITY PARTICIPANTS

I agree that _____ has my permission to participate in **the Petoskey Steel Drum Band/Summer Band activities,** which will take place at **the Public Schools of Petoskey** _____during the summer of _2020. Student and parent/guardian have read and agree to follow The Public Schools of Petoskey's participation rules.

I agree that participation in the above noted activity is voluntary and I have knowledge of and assume all risks for the activity to include injuries as well as exposure to communicable diseases, including COVID19.

I certify that I understand current COVID19 risks and symptoms and current CDC guidelines. I certify that _____ has not had any symptoms of COVID19/coronavirus nor been exposed to anyone that had such symptoms or diagnosis in the last 14 days. I agree to notify the school district of any changes and I will NOT send _____ to the activity if any symptoms develop or with notice of an exposure to COVID19 until the **Student** has been medically cleared.

I understand that this discharges the **SCHOOL DISTRICT**, **ITS EMPLOYEES**, and **AGENTS** from any liability or claim. **SCHOOL DISTRICT, ITS EMPLOYEES,** and **AGENTS** will not assume responsibility for any injury or illness incurred while participating or attending the program or any physically related activity. Certain risks are inherent during participation in these events. Nor will the **SCHOOL DISTRICT, ITS EMPLOYEES,** or **AGENTS** be liable for lost or stolen items while participants are using the facilities or are on the premises. I waive all claims and release the **SCHOOL DISTRICT**, **ITS EMPLOYEES,** and **AGENTS** from any and all injury, illness, or damage that _____ or **I** may suffer as a result of participation or attendance in the activity. I agree to indemnify and hold the **SCHOOL DISTRICT**, **ITS EMPLOYEES**, and **AGENTS** harmless from any claims presented on **MY OWN BEHALF**, or claims presented by _____ or _____**'s representative**.

Signature of Parent or Guardian: _____

Date: _____