



**Northwest Athletic Conference  
COVID-19 ASSUMPTION OF RISK AND RELEASE**

I acknowledge that I have voluntarily chosen to use the athletics facilities and equipment and to participate in the intercollegiate athletics activities and programs of \_\_\_\_\_ College sponsored through the Northwest Athletic Conference (NWAC), hereafter "the program" or "program activities".

**A. COVID-19 ASSUMPTION OF RISK**

I understand that my participation in program activities may involve foreseeable as well as unforeseeable risks to my health or safety (including death), or the health and safety of others, as a result of the worldwide spread of the novel coronavirus known as COVID-19.

**COVID-19 is highly contagious and is spread by coming into personal contact with others or using shared facilities and equipment. Participating in intercollegiate athletics, including practices, competitions, physical activity or conditioning classes, may increase the risk of contracting the disease or spreading it to others, including teammates, family, and friends. Any participant may be unknowingly carrying the disease and capable of infecting others without experiencing any symptoms. Participating in competitive events with other schools, as well as traveling to such events, may involve an enhanced risk of exposure to the virus.**

I understand and agree that it is my responsibility to follow NWAC and College guidelines or directives relating to my participation, including any guidelines or directives relating to social distancing, proper hygiene and handwashing practices, and the use of personal protective equipment (PPE) such as face masks and eye protection. I understand and agree that I am solely responsible for determining my ability to participate in the program and for notifying College athletics staff of any medical or other health condition that would limit my ability to participate safely. I understand and agree that NWAC, the College and its staff cannot guarantee or insure my health or safety and that it is my responsibility to obtain any appropriate insurance coverage and to pay any medical or other expenses relating to my participation in the program.

**By my signature below, I acknowledge and voluntarily assume the above described risks of participating in the program, including but not limited to the risks of traveling to or from participation sites.**

**B. RELEASE OF CLAIMS**

If I am age 18 or over, as a condition of my being permitted to participate in intercollegiate athletics, and for and in consideration of the services provided by NWAC and the College's athletics department, I hereby waive and release any claims that I or my estate may have against NWAC, the College, or their trustees, directors, officers, employees, volunteers, or agents based on any loss, illness or injury (including death), that I may sustain arising from, in connection with, or incidental to my participation, whether such loss, illness or injury is caused by my own acts or omissions or by those of other program participants, NWAC or College staff or volunteers.



If I am signing as a parent/guardian of a participant under age 18, as a condition of my student's being permitted to participate in intercollegiate athletics, and for and in consideration of the services provided by NWAC and the College's athletics department, I hereby waive and release any claims that I or we may have against NWAC, the College, or their trustees, directors, officers, employees, volunteers, or agents based on any loss, illness or injury (including death) that my student may sustain arising from, in connection with, or incidental to my student's participation, whether such loss, illness or injury is caused by my student's own acts or omissions or by those of other program participants, NWAC or College staff or volunteers.

**I have read and understand this COVID-19 Assumption of Risk and Release. I further understand and agree that the foregoing Assumption and Release is intended to be enforceable to the fullest extent permitted by law.**

Participant Name (Print): \_\_\_\_\_

Participant Signature: \_\_\_\_\_

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

**If the student participant is under the age of 18, this COVID-19 Assumption of Risk and Release must be signed both by the student and by the student's parent or legal guardian:**

Parent/Guardian Name (Print) \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

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

**AAG 06.17.20**

