



## Activity Release and Waiver HCHS Summer 2021

**PLEASE READ CAREFULLY BEFORE SIGNING. THIS DOCUMENT INCLUDES  
A RELEASE OF LIABILITY AND WAIVER OF CERTAIN LEGAL RIGHTS.**

**Acknowledgment of Risks:** I consent for my child to participate in (Activity Name) \_\_\_\_\_ organized and sponsored by (Activity Sponsor) \_\_\_\_\_ and acknowledge that my child's participation in these activities is voluntary. I understand there are risks associated with participation in these activities including but not limited to personal injuries, infection, communicable diseases, food-borne and other illnesses, including but not limited to COVID-19. In the event of any emergency requiring medical attention, I hereby authorize the activity Staff to administer first aid or seek medical treatment for my child. I request that my child be transported if necessary to seek needed medical attention. I understand that I will be responsible for any medical and related expenses for my child.

**RISKS ASSOCIATED WITH CORONAVIRUS/COVID-19:** The activity Sponsor/Staff will implement mitigation measures as may be recommended or required by local, state and federal authorities. These measures may include mask wearing, social distancing measures and various hygienic practices. Despite such precautions, the risks associated with transmission of COVID-19 remain present. The nature of many activities makes it difficult to observe all of the recommended precautions at all times; for example, individuals will not always be six feet apart and infrequent and incidental moments of closer proximity and contact are likely to occur, and surfaces may not always be free of viruses and other infectants, etc. As a result of participation in activities and proximity to other participants, your child may be exposed to the risk of infection of communicable diseases, including COVID-19.

I understand it is impossible in advance to specify all known and unknown risks that may arise from participation in these activities. Nevertheless, I want my child to have the opportunity to participate in these activities, and this Activity Release and Waiver is given in exchange for that opportunity. I fully acknowledge and assume all risks arising from or in any way connected with my or my child's participation in these activities.

**POSSIBILITY OF ACTIVITY CLOSURE:** I understand that the operation of this activity is subject to the regulations and various health and operational orders of the Federal, State and local government agencies, and further understand that changes to the current operational status of this activity could occur which would necessitate the

cancellation of some or all sessions. I understand that depending on the conditions and timing of any necessary cancellation, I may forfeit some or all of the fees paid.

**WAIVER, RELEASE, AND INDEMNIFICATION:**

I, individually, or in my capacity as parent/guardian of my child, hereby waive, release, indemnify, and hold harmless the Sponsor/Staff of this activity, Hayden Catholic High School, the Archdiocese of Kansas City in Kansas and/or any of its constituent organizations, agents, ministers, employees, contractors, and volunteers (collectively, "Released Parties") from all demands, claims, or liability arising from or in any way connected with this activity, and that involve any injury, loss, property damage, infection, sickness, and death to me, my spouse, my child, my property, or the property of my child. I HEREBY ACKNOWLEDGE AND EXPRESSLY AGREE THAT THIS WAIVER, RELEASE, AND INDEMNIFICATION APPLIES TO CLAIMS ARISING OUT OF THE RELEASED PARTIES' OWN NEGLIGENCE, but does not apply to claims of criminal conduct, gross negligence, or intentional acts.

I have read and I understand this Activity Release and Waiver. By signing, I warrant that I have the legal power, right, and authority to make this agreement and to bind myself or my child hereto. I have signed this Activity Release and Waiver voluntarily and of my own free will.

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**Participant's Name**

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**Participant's Date of Birth**

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**Signature of Participant or, if under 18,  
Signature of Parent/Guardian**

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**Date**

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**Signature of Custodial Parent (if applicable)**

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**Date**