

Wichita Legacy Parental/Guardian COVID-19 Consent Form and Liability Waiver

Participant's name: _____

Parent/Guardian name: _____

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID19 is extremely contagious and as a result, social distancing is recommended. Wichita Legacy will follow state and local standards of conduct and has put in place reasonable preventative measures to reduce the spread of COVID-19 at its activities.

However, even though such standards will be followed and reasonable measures put into place, we cannot guarantee that you or your child(ren) will not become infected with COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and that my child(ren) and I may be exposed to or infected by COVID-19 by participating in these activities and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at a Wichita Legacy function may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Wichita Legacy employees, volunteers, and program participants and their families.

Considering the foregoing, however, I, _____, grant permission for my child(ren), _____, to participate in this activity.

I confirm that my child or myself will only attend if symptom-free for at least 14 days. I further agree on to release, indemnify, hold harmless, and defend Wichita Legacy directors, employees and representatives associated with the event arising from or in connection with the negligent acts or omissions of the indemnitees' in relation to prevention of the spread of the COVID-19 virus.

Signature: _____ Date: _____