

**REGIONAL SCHOOL UNIT 40
ACKNOWLEDGEMENT AND CONSENT FORM**

I, _____, hereby consent to participate in extra-curricular athletics organized by RSU 40. I understand that the activity poses risks of personal injury, loss or damage to property, or loss of life, including risk of exposure to and infection with communicable diseases, including, but not limited to COVID-19, an extremely contagious disease that can lead to serious injury or even death. I am aware that hygiene and safety measures such as increased cleaning, handwashing, personal protective equipment and, where possible, social distancing, do not eliminate the risk of injury or other harm. I acknowledge that safety measures meant to prevent the spread of COVID-19 may be difficult or impossible to deploy in the context of the Activity and that, therefore, I may be at a heightened risk of COVID-19 exposure or infection by participating in the program. I knowingly assume any and all risks connected with the activity.

READ AND UNDERSTAND THIS DOCUMENT PRIOR TO SIGNING IT

Date: _____

Parent/Guardian's Signature and Printed Name

Student's Signature and Printed Name