

## Athlete Participation

### Territorial Sport Program

Athlete's Name (First and Last): \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent's Name (First and Last): \_\_\_\_\_

Coach's Name: \_\_\_\_\_

Team Name: \_\_\_\_\_

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At this time, COVID protocols are:

- Athletes during active play are not required to wear a mask, however when on the bench, a mask must be worn.
- All parents, coaches, and spectators must wear a mask when on school premises. No exceptions will be made. Territorial Sports Program risks losing access to facilities if these rules are not followed.
- If your athlete has been identified as a close contact and is in quarantine from school, they are not allowed to participate in practices or games until cleared.
- By initialing below, you acknowledge you have read and understand these rules and will follow them. \_\_\_\_\_

The novel coronavirus ("COVID-19") has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. The Territorial Sports Program Board of Directors (TSP) has put in place preventative measures to reduce the spread of COVID-19; however, cannot guarantee that you will not become infected with COVID-19. Further, attending any program or activity organized by TSP could increase your risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 while attending games organized by TSP 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 games may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Territorial Sports Program Board of Directors, coaches, referees, employees, volunteers, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I may experience or incur in connection with my attendance at a game organized by TSP or ("Claims"). On my behalf, I hereby release, covenant not to sue, discharge, and hold harmless the Territorial Sports Program, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Territorial Sports Program, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after attending any program or activity organized by TSP.

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Participant's Signature & Date

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Participant's Printed Name / Age  
(Please print legibly)

PARENTAL CONSENT: I am the minor's parent or guardian named above and I understand the nature of the Waiver of Liability above and verify and consent to the minor attending games organized by the Territorial Sports Program. On the minor's behalf, I hereby release, covenant not to sue, discharge, and hold harmless the Territorial Sports Program, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. On behalf of the minor, I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Territorial Sports Program, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after attending activity organized by Territorial Sports Program.

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Parent/Guardian Signature & Date

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Printed Name of Parent/Guardian