

**Tri-City College Prep School
Waiver, Release, and Assumption of Risk Form**

On behalf of myself, my household members, and my minor child, _____,
I hereby give permission for my child to attend any of the Tri-city Prep Extra-Curricular Activities.
My child and I are familiar with, and knowingly and voluntarily accept, any and all risks associated with attending
extra-curricular activities. I acknowledge that my child's participation in this program is wholly voluntary and is not
part of any regular school curriculum.

I specifically assume all risks and hazards associated with my child's participation in the activities including, but not
limited to, the risks associated with the novel COVID-19 virus. I understand that my child will be associating with
staff and other children and may contract COVID-19, and other viruses and diseases, through my child's
participation in activities. Although precautions will be taken, they may not be adequate to prevent the spread of
COVID-19 given, among other things, the relatively long incubation period, and the fact that many infected persons
are asymptomatic. I understand and voluntarily assume the risk that my child may acquire COVID-19, and that
COVID-19 may subsequently be transmitted from my child to me, my family, and members of my household along
with my child transmitting it to other students and staff. In accordance with ADHS Emergency Measure 2020-03, a
measure that was signed and notarized on August 21st, should a positive COVID-19 case occur, it will be reported to
the Yavapai County Health Department within 24 hours.

While instruction and reasonable supervision will be provided, staff cannot ensure my child's safety. Accidents and
injuries happen, and it is impossible to eliminate the risk that my child will suffer an injury or illness.

I certify that my child is in good health, has no fever, and has no current issues that make it unsafe for my child to
participate in the activity, which may not have a medical professional on staff. I will notify the school and not send
my child to any activity if my child develops a fever or illness or tests positive for COVID-19. I acknowledge that
my child and I are responsible for ensuring that he or she takes any necessary medication, and for avoiding any
allergies. In the event of a medical emergency, 911 will be called and I will be responsible for any and all costs of
medical treatment. I understand that during sports activities my student and other athletes may not be wearing a face
covering and will be around others who are actively engaged in close contact which may include sweating,
coughing, etc.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to
my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness,
damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur
in connection with my child(ren)'s attendance at the activity ("Claims"). On my behalf, and on behalf of
my children, I hereby release, covenant not to sue, discharge, and hold harmless Tri-City College Prep School, 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 school, its employees, agents, and representatives, whether a COVID-19 infection
occurs before, during, or after participation in any school program.
I further agree not to sue the Released Parties, and to defend and indemnify the Released Parties for all claims,
damages, losses, or expenses, including attorneys' fees, if a suit is filed concerning an injury, illness, or death to me,
my child, or my household members resulting from participation in the activities.

Student Name (Printed) _____

Parent/Guardian Name (Printed) _____

Parent/Guardian Signature _____ Date _____