



# School District of the City of Iron Mountain

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Jerome J. Sardina  
Superintendent

300 West B. Street  
Iron Mountain, MI 49801  
(O) 906-779-2600

## NOTICE AND WAIVER TO ALL VOLUNTARY ACTIVITY PARTICIPANTS

### (MINOR STUDENT)

I agree that \_\_\_\_\_ has my permission to participate in \_\_\_\_\_ which will take place at **Iron Mountain Public Schools** during the dates of \_\_\_\_\_. Student and parent/guardian have read and agree to follow **SCHOOL DISTRICT'S** participation rules.

I agree that participation in the above noted activity is voluntary and I have knowledge of and assume all risks for the activity to include injuries as well as exposure to communicable diseases, including COVID19.

I certify that I understand current COVID19 risks and symptoms and current CDC guidelines. I certify that **MINOR** has not had any symptoms of COVID19/coronavirus nor been exposed to anyone that had such symptoms or diagnosis in the last 14 days. I agree to notify the SCHOOL DISTRICT of any changes and I will NOT send **MINOR** to the activity if any symptoms develop or with notice of an exposure to COVID19 until **MINOR** has been medically cleared.

I understand that this discharges the **SCHOOL DISTRICT, ITS EMPLOYEES, and AGENTS** from any liability or claim. **SCHOOL DISTRICT, ITS EMPLOYEES, and AGENTS** will not assume responsibility for any injury or illness incurred while participating or attending the program or any physically related activity. Certain risks are inherent during participation in these events. Nor will the **SCHOOL DISTRICT, ITS EMPLOYEES, and AGENTS** be liable for lost or stolen items while participants are using the facilities or are on the premises. I waive all claims and release the **SCHOOL DISTRICT, ITS EMPLOYEES, and AGENTS** from any and all injury, illness, or damage that the **STUDENT or I** may suffer as a result of participation or attendance in the activity. I agree to indemnify and hold the **SCHOOL DISTRICT, ITS EMPLOYEES, and AGENTS** harmless from any claims presented on **MY OWN BEHALF**, or claims presented by **MINOR** or **MINOR's representative**.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

### (ADULT)

I agree to participate in \_\_\_\_\_ which will take place at **Iron Mountain Public Schools** during the dates of \_\_\_\_\_. I have read and agree to follow **SCHOOL DISTRICT'S** participation rules.

I agree that participation in the above noted activity is voluntary, and I have knowledge of and assume all risks for the activity to include injuries as well as exposure to communicable disease, including COVID19.

I certify that I understand current COVID19 risks and symptoms and current CDC guidelines. I certify that I have not had any symptoms of a COVID19/coronavirus nor been exposed to anyone who has had such symptoms or diagnosis in the last 14 days. I agree to notify the School District of any changes and I will NOT participate if any symptoms develop or with notice of an exposure to COVID19 until medically cleared.

I understand that this discharges the **SCHOOL DISTRICT, ITS EMPLOYEES, and AGENTS** from any liability or claim. **SCHOOL DISTRICT, ITS EMPLOYEES, and AGENTS** will not assume responsibility for any injury or illness incurred while participating in the program or any physically related activity. Certain risks are inherent during participation in these events. Nor will the **SCHOOL DISTRICT, ITS EMPLOYEES, and AGENTS** be liable for lost or stolen items while participants are using the facilities or are on the premises. I release and waive all claims against the **SCHOOL DISTRICT, ITS EMPLOYEES, and AGENTS** from any and all injuries or damages I may suffer as a result of my participation in the activity. I agree to indemnify and hold the **SCHOOL DISTRICT, ITS EMPLOYEES, and AGENTS** harmless from any claims.

Signature \_\_\_\_\_ Date \_\_\_\_\_