

District IV Honor Band Association

Parent/Guardian Agreement and Consent and Assumption of the Risk and Waiver of Liability Relating to COVID-19

I am aware of the continuing existence of the nationwide COVID-19 pandemic and the highly contagious nature of the virus. I understand that the student's participation in the activities will sometimes, inadvertently, cause my student to be in close proximity to other students and staff, raising the risk of infection and possibly serious illness or death, from such participation. I understand that the staff will undertake precautionary measures, including implementation of preventative guidelines from the CDC and the Louisiana Department of Education in an attempt to reduce the spread of COVID-19; however, there is no guarantee that my student will not become infected with COVID-19. Furthermore, attending activities may increase my student's risk of contracting COVID-19.

On behalf of myself and my child, I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child or myself (including, but not limited to, personal injury, infection, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child may experience or incur in connection with my child's participation in honor band activities ("Claims").

On behalf of myself and my child, I hereby release, covenant not to sue, discharge, and hold harmless the District IV Honor Band Association, its employees, agents, and representatives, free from any and all Claims, including all claims for injuries, disease, infection, 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 District IV Honor Band Association, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in honor band activities.

Severability. Should any provision of this Agreement be held invalid by any court of competent jurisdiction, such invalidity shall not affect any other provision of this Agreement that can be given effect without the invalid provision; and, to this end, the provisions are severable.

Read each statement and initial in the space provided:

_____ I have read and agree to all of the foregoing terms and conditions of this Agreement and Consent.

_____ I am signing this Agreement and Consent voluntarily and knowingly. I am not under any duress or threat. I have had the opportunity to review this Agreement and to seek the advice of an attorney prior to signing it. I am fully aware that I am waiving rights to file a lawsuit or claim against the Honor Band Association and its employees.

_____ I acknowledge the contagious nature of COVID-19. I voluntarily assume the risk that my child/student and I may be exposed or infected by COVID-19 by attending Honor Band Activities.

_____ I understand that the CDC's definition of a "vulnerable individual" are those with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune systems are compromised such as by chemotherapy for cancer and other conditions requiring such therapy. I further understand that it is highly recommended that if my student identifies as a "vulnerable individual" that I should seek the advice and clearance of a physician prior to allowing my student to participate in Honor Band activities.

_____ I understand that Honor Band activity participation is not mandatory and that participation is my choice. I understand that I assume all liability and risk from my decision to participate.

_____ I understand that I have the continuing obligation to communicate any exposure to COVID-19 by my child to my child's/student's band director.

_____ I understand that my child/student must complete the health screener before attending Honor Band activities. If my child/student exhibits any of the symptoms of COVID-19 and/or answers "YES" to any of the questions on the student health screener, my student will not participate in Honor Band activities and shall remain home.

_____ I agree to indemnify, defend, and hold harmless the Honor Band Association and its employees against any and all claims and liability arising out of this Agreement or my child's participation in Honor Band activities, including claims arising by my child's participation in the program.

_____ I understand the highly contagious nature of COVID-19 and the inherent risks involved. I consent to my student's participation in Honor Band activities and assume the risk of the student's potential exposure to and infection from COVID-19 as a result thereof.

_____ I understand that my child will be required to use all necessary PPE and adhere to social distancing guidelines. This includes, but is not limited to, bell covers and face masks when not playing their instrument.

Student Information Release

Federal and State laws require the permission of a parent/guardian as it pertains to the release of their student's name, school affiliation, and limited identifying information when that information is to be shared with an organization external to a school system. This includes the District IV Honor Band Association, the professional organization that sponsors the Honor Band Activities. In order for a student to participate in the honor groups, the parent/guardian must sign a consent form enabling the use of the student's name and limited identifying information during the audition, selection, notification, and participation processes.

What information is collected? Student name/ mailing address/ telephone contact number, school, instrument, grade, and photographic and/or video in group photos and/or video recordings of the performance

How will the information be used? For scheduling and registration during the audition process, for notification of selection to an honor ensemble via the association's website – www.districtiv.org, in concert programs (name, school affiliation and instrument only), publication of video recordings and/or photography of the performance.

As parent/guardian of the student named below:

_____ I grant permission for my student's name, school affiliation, and limited identifying information (as described above) to be submitted to the District IV Honor Band Association by the student's music instructor, who is a member of the association.

_____ Please DO NOT submit my student's name, school affiliation, and limited identifying information (as described above) to the District IV Honor Band Association. **I understand that this will prohibit my student from being able to participate in the audition and event.**

If you have more than one student, a separate waiver must be completed for each student.

Print Student's Name

Instrument(s)

School

Band Director

Print Guardian's Name

Guardian's Signature

FEES: Audition Fee of \$10.00 per Instrument

If selected for the Honor Band, a \$15.00 participation fee will be collected prior to the first rehearsal.