



McDowell High School
600 McDowell High Drive
Marion, NC 28752
828-652-7920
Edwin H. Spivey III, Principal

Informed Consent
Athletic and Extracurricular Activities / COVID-19

Name of Student _____ (Please Print)

Dear Parents & Legal Guardians,

Thank you for your continued patience and trust as we work to make in-person educational and extracurricular activities available to your student. The health and safety of your student and our community is our top priority. With the evolving situation around COVID-19, we want to make sure you and your student know the best ways to protect yourselves and others when participating in voluntary, extracurricular activities, including athletic activities.

As with the transmission of any communicable disease like a cold or the flu, you may be exposed to COVID-19, also known as "coronavirus," at any time or in any place. Be assured that we will continue to follow state and federal recommendations to limit transmission of COVID-19. All protocols are being vetted with local health officials prior to in-person activities. The coach or sponsor of your student's extra-curricular activity will review with your student the appropriate requirements and protocols for maintaining a safe and healthy environment.

However, even with careful attention to recommended precautions, there is still a chance that you or your child could be exposed to an illness while participating in extracurricular activities, just as you might be at your place of work, grocery store, or favorite restaurant. Additionally, although measures are being taken to increase physical distancing, due to the nature of the activities provided, it may not always be possible to maintain physical distancing between students, staff, and parents. In short, there are no guarantees that your student will not be exposed during in-person activities sponsored by McDowell County Schools.

Again, participation is voluntary. Therefore, through your student's participation in the District's extracurricular activities, you understand and agree to the following:

1. Participation in voluntary extracurricular activities includes possible exposure to and illness from communicable diseases, including but not limited to a common cold, influenza, and COVID-19. While physical distancing may reduce this risk, there are unique health risks due to COVID-19, including serious illness and death, especially to those with underlying health conditions;
2. The District may take the temperature and ask basic health screening questions to students; and

3. Any District safety requirements or protocols for your student's participation in extracurricular activities must be followed by your student.

Parent / Guardian Agreement:

I have read the contents of this Informed Consent to my student, including the risks of COVID-19 and participating in extracurricular activities and my student's personal responsibilities for adhering to any requirements for participation.

By signing below, I agree that I have read and understood this Informed Consent. By my signature below, I also agree that I am accepting the inherent risk of my student voluntarily engaging in the District's extracurricular activities. If the student resides in two or more households, my signature also confirms that a minimum of one responsible parent or guardian has signed from each household.

Printed Name of Parent/Legal Guardian #1

Parent/Legal Guardian #1 Signature (if student is under 18)

Date

Printed Name of Parent/Legal Guardian #2

Parent/Legal Guardian #2 Signature (if student is under 18)

Date

Student Signature

Date

"Every Student Graduates With A Plan For A Successful Future."