

**ASSUMPTION OF THE RISK AND WAIVER AND RELEASE OF LIABILITY**  
**FOR MAINE TOWNSHIP H.S. DISTRICT 207**

Please list all users of the Maine Township H.S. District 207 facilities for whom you are the parent/legal guardian:

_____ Name	_____ Address	_____ Date of Birth
_____ Name	_____ Address	_____ Date of Birth
_____ Name	_____ Address	_____ Date of Birth

Subject to the terms and conditions of this Waiver and Release, the Releasors identified above intend to enter and use the facilities belonging to District 207 for voluntary strength & conditioning activities. (insert dates of voluntary workouts). Releasors agree as follows:

1. Releasors understand and acknowledge that 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 be 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.
2. Releasors understand and acknowledge that myself, those accompanying me to the District 207 facilities, and my household members are at a higher risk of contracting COVID-19 by using the District 207 facilities.
3. Releasors represent and agree that they have not tested positive for COVID-19 and have not experienced symptoms commonly associated with COVID-19 in the last 30 days including, but not limited to, fever, cough, shortness of breath or difficulty breathing, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea.
4. With full awareness and appreciation of the risks involved, Releasors, on behalf of myself, my family, spouse, estate, heirs, executors, administrators, assigns, and personal representatives, agree to release, acquit, and forever discharge District 207 and its employees, agents, servants, officers, trustees, and representatives from any and all liability, claims, demands, actions, causes of action, judgments, costs, and expenses (including reasonable attorney fees) which I now have or may have in the future, of whatever kind or nature and howsoever originating, which arise from or by reason of any loss, damage, illness, permanent disability, or any other personal injury (including death) that may be sustained related to exposure or infection by COVID-19 that may result from the actions, omissions, or negligence of myself and others, including but not limited to, District 207 employees, agents, servants, officers, trustees, and representatives.
5. Releasors voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to myself or anyone in my household (including, but not limited to personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that Releasors or my household members may experience or incur in connection with my use of the District 207 facilities ("Claims"). On my behalf, and on behalf of my household members, Releasors hereby release, covenant not to sue,

discharge, and hold harmless District 207, its employees, agents, servants, officers, trustees, 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. Releasors understand and agree that this Waiver and Release includes any Claims based on the actions, omissions, or negligence of District 207, its employees, agents, servants, officers, trustees, and representatives, whether a COVID-19 infection occurs before, during, or after Relea

6. Releasors understand and acknowledge on behalf of myself and those whom I am the parent or legal guardian that I participate at my own risk. Releasors are aware that athletic and other activities are vigorous and can involve severe cardiovascular stress. Releasors are responsible for the safe operation of the equipment and I am responsible for my children or those that I am legal guardian for during their visit. Releasors have a personal responsibility to follow any posted, written, or orally communicated safety rules and procedures established by the District 207 and that are normally associated with use of facilities.
7. With full awareness and appreciation of the risks involved, Releasors, on behalf of myself, my family, spouse, estate, heirs, executors, administrators, assigns, and personal representatives, agree to release, acquit, and forever discharge District 207 and its employees, agents, servants, officers, trustees, and representatives from any and all liability, claims, demands, actions, causes of action, judgments, costs, and expenses (including reasonable attorney fees) which Releasors now have or may have in the future, of whatever kind or nature and howsoever originating, which arise from or by reason of any loss, damage, illness, permanent disability, or any other personal injury (including death) that Releasors may sustain at the District 207 facilities that may result from the actions, omissions, or negligence of myself and others, including but not limited to, District 207 employees, agents, servants, officers, trustees, and representatives, including those injuries and damages that may result from participation in voluntary workouts that myself or my child of whom I am his/her parent or legal guardian have agreed to participate.
8. That this Waiver and Release is intended to be as broad and inclusive as permitted by the laws of the State of Illinois, and if any portion hereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.
9. In signing this Waiver and Release, I hereby acknowledge and represent that I have read the foregoing Waiver and Release; that I understand its content, terms, and conditions; that I understand that such content, terms, and conditions are contractual; and that I sign this Waiver and Release voluntarily and on behalf of myself and as parent or legal guardian, if applicable.

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Signature of Parent or Guardian  
if Participant is Minor

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Printed Name of Minor Participant

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Date

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Printed Name of Minor Participant

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Printed Name of Minor Participant