

**SUPPLEMENTAL HOLD HARMLESS, RELEASE,
AND WAIVER OF LIABILITY RELATED TO COVID-19**

The Fairbanks School District ("FNSBSD") will allow approved interscholastic activities (herein referred to as "ASAA Activities") to take place. In consideration of being permitted to compete, officiate, observe, work, or participate in ASAA Activities, I, for myself and my children, agree to the following:

1. I acknowledge that I am aware that by entering the premises and participating in the ASAA Activities that there are risks to me and my children of being exposed to COVID-19, and/or any mutation or variation thereof. I am also aware that such an exposure can occur directly.
2. I understand that participating in ASAA Activities is optional.
3. I understand that certain individuals are more susceptible to becoming seriously ill if they contract COVID-19, including people over the age of 65, people with serious underlying health conditions, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, and those whose immune systems are compromised. I understand that if my children, including the actual participant in ASAA Activities, fall within one or more of these categories, there or I is at greater risk.
4. I understand that while FNSBSD strives to maintain everyone's safety at all ASAA Activities, FNSBSD cannot eliminate all risks. FNSBSD staff may be negligent or make mistakes, when trying to eliminate or mitigate the risks, including the risks of contracting COVID-19. By signing this Waiver, FNSBSD asks you (and anyone that could legally stand in your place) to ASSUME ALL RISKS associated with your or your children's involvement in the ASAA Activities;
5. I hereby voluntarily agree to RELEASE, WAIVE, DISCHARGE, and COVENANT NOT TO SUE FNSBSD and/or its officers, directors, and employees; the Fairbanks School Board; and any individuals, companies, or associations having anything to do with the ASAA Activities, including promoters, participants, officials, and owners of the premises where the ASAA Activities takes place (hereinafter referred to as "Releasees"). By signing this document, RELEASEES WILL BE RELEASED FROM ANY AND ALL LIABILITY for any and all loss or damage whether caused by the negligence of the Releasees or otherwise; and
6. I hereby agree to INDEMNIFY AND HOLD HARMLESS the Releasees from any loss, liability, damage, or cost (including reasonable attorney's fees) they may incur arising out of or related to my illness or death, or the illness or death of my children, including the actual participant(s) in the ASAA Activities whether caused by the negligence of the Releasees or otherwise.

BY SIGNING BELOW, YOU AGREE THAT YOU HAVE READ AND UNDERSTOOD THIS WAIVER AND RELEASE, AND AGREE TO BE BOUND BY ITS TERMS.

Printed Name of Parent/Guardian or Student if Over the Age of 18:

Name: _____
(Parent/Guardian PRINTED NAME)

Date:

Signature:

Name: _____
(Student PRINTED NAME)