The DeSoto County School District has put in place protective measures to mitigate the spread of COVID-19. These measures include but are not limited to acting in conformance with all federal, state and local safety and sanitation requirements, as well enforcing all social distancing and mask requirements. However, because COVID-19 is considered to be extremely contagious and can result in a range of symptoms, the District cannot guarantee that attendees or participants at/in a District sponsored program, event or activities will not become exposed to or infected with COVID-19.

By signing this agreement, I acknowledge that I understand the risks related to COVID-19 and other communicable diseases and understand that the risk of contracting COVID-19 may be increased by participation in District sponsored programs, events or activities. I voluntarily assume the risk of allowing my child to participate in said programs, events or activities. I understand that my child is NOT required to participate in said programs, events or activities as these are voluntary and extracurricular. I voluntarily agree to assume all risks and accept sole responsibility for any injury/illness to my child and /or myself arising out of the participation in said programs, events or activities. On behalf of myself, my child, and any successor guardian of my child, I hereby release, covenant not to sue, and agree to hold harmless the DeSoto County School District, its Board of Trustees, employees, agents, insurers, and representatives for any and all claims, liabilities, harm damages, costs, or expenses related to any injury or illness, including the contraction of COVID-19, arising out of activities connected with the programs, events or activities listed below.

I agree that I, my student, and any member of my family will act in conformance with all safety and sanitation requirements, as well as all social distancing and mask requests, while attending or participating in a District program, event or activity. I understand that if I or my student fail to follow these regulations and requests, the ability of my student to participate may be suspended, revoked or otherwise negatively impacted.

I acknowledge that I have read the foregoing fully and understand the contents of the Waiver. I acknowledge the risks associated with participating in District sponsored program, event or activities. I wish for my child to participate in the DeSoto Central Prom sponsored by Desoto Central High School.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_

Parent/Guardian Signature Date Student Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name of Parent/Guardian Print Name of Student