

**Wilmington Area School District**  
**Marching Band**  
**Participation Waiver for Communicable Diseases Including COVID-19**

The COVID-19 pandemic has presented musical groups across the world with a myriad of challenges concerning this highly contagious illness that primarily attacks the upper respiratory system. Some severe outcomes have been reported in children, and a child with a mild or even asymptomatic case of COVID-19 can spread the infection to others who may be far more vulnerable.

While it is not possible to eliminate all risk of furthering the spread of COVID-19, the WASD will take necessary precautions and comply with guidelines from the federal, state, and local governments, CDC, PA DOH, as well as the NFHS and PIAA, to reduce the risks to students, coaches, and their families. As knowledge regarding COVID-19 is constantly changing, WASD reserves the right to adjust and implement precautionary methods as necessary to decrease the risk of exposure for our staff, students, and spectators. The full set of guidelines and precautionary methods will be made available to parents, staff, and students prior to resuming in-person instruction. Some precautionary methods in the WASD Instrumental Music Action Plan include but may not be limited to:

1. Health screenings prior to any practice, event, or meeting with participation in the activities being limited and/or prohibited where an individual displays positive responses or symptoms.
2. Encourage social distancing and promote healthy hygiene practices such as hand washing, using hand sanitizer, etc.
3. Intensify cleaning, disinfection, and ventilation in all facilities.
4. Education of students, parents, and staff on health and safety protocols.
5. Require students and staff to provide their own water bottle for hydration.
6. Require students, staff, & parent volunteers to wear protective face coverings during practices & events unless a medical exemption can be provided to the school health officials by a licensed physician.

By signing this form, the undersigned voluntarily agree to the following Waiver and release of liability. The undersigned agree to release and discharge all claims for ourselves, our heirs, and as a parent or legal guardian for the student named below, against the WASD, its Board of Directors, successors, assigns, officers, agents, employees, and volunteers and will hold them harmless from any and all liability or demands for personal injury, psychological injury, sickness, death, or claims resulting from personal injury or property damage, of any nature whatsoever which may be incurred by the student or the undersigned relating to or as a result of the student's participation in music programs, events, and activities during the COVID-19 pandemic.

The undersigned acknowledge that participating in the marching band program, and its events, and activities may include a possible exposure to a communicable disease including but not limited to MRSA, influenza, and COVID-19. The undersigned further acknowledge that they are aware of the risks associated with COVID-19 and that certain vulnerable individuals may have greater health risks associated with exposure to COVID-19, including individuals with serious underlying health conditions such as, but not limited to: high blood pressure, chronic lung disease, diabetes, asthma, and those whose immune systems that are compromised by chemotherapy for cancer, and other conditions requiring such therapy. While particular recommendations and personal discipline may reduce the risks associated with participating in marching band during the COVID-19 pandemic, the risk of serious illness, medical complications and possible death does exist.

We knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of others, and assume full responsibility for student's participation in the marching band and music activities during the COVID-19 pandemic. We willingly agree to comply with the stated recommendations put forth by the WASD to limit the exposure and spread of COVID-19 and other communicable diseases. We certify that the student/individual is in good physical condition or believe Student/individual to be in good physical condition and allow participation in this activity at our own risk.

Name (Printed): \_\_\_\_\_ Signature of Parent/Guardian/Adult: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_