

**STARS YOUTH ENRICHMENT PROGRAM, INC.**  
**WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19**

In consideration of my child being allowed to participate in the STARS Youth Enrichment Program, Inc. ("STARS") day camp Program and related events and activities, the undersigned acknowledges, consents to, and agrees that:

1. 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 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. It is believed that an individual can be infected with COVID-19 without their knowledge and be asymptomatic. STARS Youth Enrichment Program, Inc. has put in place preventative measures to reduce the spread of COVID-19. However, STARS cannot guarantee that I, my child, or anyone else will not become infected with COVID-19, including my spouse, guests, unborn child, or relatives.
2. Participation in the Program and athletic activities includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. While certain guidelines, practices, and personal discipline may reduce this risk, the risk of serious illness and /or death through participation is real and does exist.
3. I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I or my child may be exposed to or infected by COVID-19 while my child is attending the STARS Youth Enrichment Program, Inc. day camp Program and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the STARS Youth Enrichment Program, Inc. day camp Program may result from the actions, omissions, or negligence of myself, my child, and others, including, but not limited to, STARS employees, volunteers, and program participants and their families.
4. I and my child agree to comply with the stated and customary terms and policies established and conditions for participation regarding protection against infectious diseases as adopted by STARS; and
5. If I or my child observes any unusual or significant hazard or unusual condition during my child's participation in the Program and the athletic activities, my child will remove himself or herself from participation and bring such to the attention of STARS personnel.
6. I, for myself and on behalf of my child, our respective heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS STARS, its officers, directors, officials, agents, representatives, volunteers, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law, whether a COVID-19 infection occurs before, during, or after participation in any STARS Youth Enrichment Program, Inc. day camp Program, related event, or activity.
7. I acknowledge that the only way to completely reduce the risk of injury from participation in day camp programs and athletics is to remove myself and my child from the activity and not participate.

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND UNDERSTAND RISKS I AM UNDERTAKING BY SIGNING IT.**

**I SIGN FREELY, VOLUNTARILY, WITHOUT INDUCEMENT, DURESS AND WITH FULL UNDERSTANDING.**

Printed Name of Participant: \_\_\_\_\_

Participant Signature: \_\_\_\_\_

Date signed: \_\_\_\_\_

**FOR MINOR CHILDREN WHO ARE UNDER 18 AT THE TIME OF EXECUTION.**

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities that include the possibility of becoming seriously ill or even dying. I agree after careful thought and consideration to assume the risk on behalf of my minor child. I, for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Name of Parent/Guardian: \_\_\_\_\_

Parent Guardian/signature: \_\_\_\_\_

Date signed: \_\_\_\_\_