

Dear Parent/Guardian:

The State of California announced that effective February 26, 2021, moderate-contact and high-contact youth and adult recreational sports may resume, including competitions, if permitted by local health authorities and if in compliance with both Los Angeles County and State requirements for these sports.

Wood Hills Sunrise Little League is taking reasonable measures to prevent the spread of COVID-19 infection, including tracking/tracing, and following applicable state and County public health orders and protocols. However, the possibility of transmission cannot be eliminated. Youth Athletes and their families must be aware of and acknowledge the risks before participating in athletics. By initialing and signing this Informed Consent Agreement, you acknowledge that you have read the County of Los Angeles Dept. of Public Health Order of the Health Officer Protocol for Organized Youth Sports: Appendix S most recently updated on 1/3/2022, and further acknowledge, accept, and agree to all the following:

- Participation in athletics is purely voluntary.

Parent/Guardian Initial: _____ (at least one parent/guardian)

- Youth Athlete has permission to participate in athletic meetings, practices, and competitions as directed by the coaching staff and Woodland Hills Sunrise Little League.

Parent/Guardian Initial: _____ (at least one parent/guardian)

- Neither the Youth Athlete nor Parent/Guardian will attend meetings, practice and/or competitions if any of the following apply:
 - A. The Youth Athlete or any member of their household is exhibiting one symptom(s) of COVID-19 that first appeared within the last 10 days: fever (at or over 100.4°F or 38°C) or chills, cough, shortness of breath or difficulty breathing, feeling tired, muscle or body aches, headache, sore throat, nausea or vomiting, diarrhea, congestion or runny nose, or new loss of taste or smell. The Parent/Guardian of the Youth Athlete will check Youth Athlete's temperature at home prior to attending meetings, practices, and/or competitions; and Youth Athlete will not attend if their temperature is at or over 100.4°F or 38°C.
 - B. The Youth Athlete or any member of their household has been diagnosed with COVID-19 or has a suspected diagnosis of COVID-19 or pending COVID-19 test.
 - C. The Youth Athlete or any member of their household has spent time with another individual who has been diagnosed with COVID-19 or has a suspected diagnosis of COVID-19.
 - D. The Youth Athlete or any member of their household is currently under isolation or quarantine orders.

Parent/Guardian Initial: _____ (at least one parent/guardian)

- If the Youth Athlete tests positive for COVID-19 or has been identified as being exposed to an individual that has tested positive for COVID-19, the Parent/Guardian, agrees to immediately inform the current President of Woodland Hills Sunrise Little League and acknowledges that Woodland Hills Sunrise Little League must contact the Los Angeles County Department of Public Health (LACDPH) to provide information regarding the confirmed positive test, including Youth Athlete's name and contact information. I consent to Woodland Hills Sunrise Little League providing such information to LACDPH or any other the administrative body as required by law. I agree to willingly cooperate with any contact tracing that is deemed necessary by Woodland Hills Sunrise Little League and/or LACDPH.

Parent/Guardian Initial: _____ (at least one parent/guardian)

- We are aware that the Youth Athlete may be exposed to COVID-19 while participating in or attending meetings, practices and/or competitions. We understand that this exposure carries a risk of infection, serious illness, or death for both the Youth Athlete and their household members.

Parent/Guardian Initial: _____ (at least one parent/guardian)

- We acknowledge Woodland Hills Sunrise Little League, the Governor, State Department of Health, LACDPH, or other administrative body with authority over Woodland Hills Sunrise Little League may determine to cancel a competition or the season at any time. We also acknowledge Woodland Hills Sunrise Little League must comply with any mandates issued by any entity with the authority over athletics and agree to comply with any such directives even if issued after signature to this agreement.

Parent/Guardian Initial: _____ (at least one parent/guardian)

- Parent/Guardian of the Youth Athlete, is/are aware that practices, games, spectating, and/or transportation will look different than prior years, including the need for physical distancing and the correct and consistent use of face masks. We agree to comply with the direction provided by Woodland Hills Sunrise Little League and acknowledge that the failure to do so may result in the Youth Athlete being refused participation at practice, competitions, and/or the entire sport season.

Parent/Guardian Initial: _____ (at least one parent/guardian)

- Youth Athlete is voluntarily participating in athletics. Parent/Guardian, agrees to assume any and all risks of infection, injury, or death, whether those risks are known or unknown.

Parent/Guardian Initial: _____ (at least one parent/guardian)

- We acknowledge that Woodland Hills Sunrise Little League is required to follow the Los Angeles County Covid-19 Exposure Management Plan Guidance for Youth Recreational Sports Programs, as updated and amended from time to time.

Parent/Guardian Initial: _____ (at least one parent/guardian)

I/WE HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM/WE ARE AWARE OF THE RISKS OF PARTICIPATING IN ATHLETICS DURING THE COVID-19 PANDEMIC. I AM/WE ARE AWARE THAT THIS FORM CONTAINS A RELEASE OF LIABILITY AND WAIVER OF ALL CLAIMS. I AM/WE ARE SIGNING THIS AGREEMENT VOLUNTARILY, FULLY AWARE OF THE RISKS AND MY RELEASE AND WAIVER OF ANY CLAIM AGAINST THE WOODLAND HILLS SUNRISE LITTLE LEAGUE, ITS EMPLOYEES, AGENTS, BOARD MEMBERS, OR OTHER RELATED PERSONS AND ENTITIES INCLUDING PROPERTY OWNER THE LOS ANGELES COMMUNITY COLLEGE DISTRICT, PIERCE COLLEGE AND ITS BOARD OF TRUSTEES, OFFICERS AND EMPLOYEES.

Youth Athlete Name: _____

Parent Printed Name: _____

Parent Signature: _____

Date: _____