

**Chugiak Eagle River Nordic Ski Club  
Health Status Agreement  
Release of Liability and Assumption of Risk**

Chugiak Eagle River Nordic Ski Club (CERNSC) intends to operate the Junior Nordic and Masters ski programs and associated events and activities in accordance with state of Alaska, and municipality of Anchorage health and public safety mandates. The safety of our community takes highest priority. Accordingly, the following have been agreed upon by the club as rules for participation and not guidelines or suggestions. Any participant who is not able to comply with these rules will not be permitted to participate in club sponsored activities. This agreement is consistent with Anchorage School District's Return to School Protocol and is informed by current CDC guidelines. Additionally, we reserve the right to modify club operations in the event of a significant change in the disease landscape and will do so in consideration of CDC, state and local health advisories.

I, the undersigned, acknowledge there are risks to myself and child of exposure to, directly or indirectly arising out of, contributed to, by, or resulting from an outbreak of any and all communicable disease to include COVID-19. To compete, officiate, observe, work, or participate in a club sponsored event, I, for myself and my children, agree to the following:

1. I/We, nor anyone in our household has had a fever of 100.4 in the last 24 hrs.
2. I/We have not tested positive for COVID-19 in the past 5 days.
3. If I/We have tested positive for COVID-19, I/we have fully recovered and have been released to return to work/play as normal by a medical doctor. I/we may resume no less than 6 days from positive test or first symptom, whichever is earlier, and symptom free for 24 hrs.

**RELEASE FROM LIABILITY:**

This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release, and on my behalf, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS Chugiak Eagle River Nordic Ski Club, its officers, officials, affiliates, agents and/or employees, other participants, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event programs and activities, from any and all claims, demands, losses, and liability arising out of or related to any ILLNESS, INJURY, DISABILITY OR DEATH I may suffer, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I have read this Release of Liability and Assumption of Risk Agreement, fully understand its terms outlined, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

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 Age of 18:

Participant Name(s): \_\_\_\_\_

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

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_