DIOCESE OF BATON ROUGE COVID-19 CONSENT FORM AND LIABILITY WAIVER

Name(s) of Child(ren):	
Birth date(s):	Gender(s):
Parent/Guardian's name: _	
Home address:	
Home phone :	Business phone:
Organization. COVID-19 Francis Xavier Catholic Sc put in place reasonable pro academic year (the "Scho arrivals/departures; before meetings and activities; collectively, the "Activition measures are in place, Pari with COVID-19. Further,	COVID-19, has been declared a worldwide pandemic by the World Health is extremely contagious and social distancing is therefore recommended. St. hool ("Parish/School") will follow state and local standards of conduct and has eventative measures to reduce the spread of COVID-19 during the 2020-2021 of Year") at the Parish/School including, but not limited to, during student during and after classes, meals and class/school assemblies; extracurricular sports practices and events; and other activities (each, an "Activity" and es"). However, even though such standards will be followed and reasonable sh/School cannot guarantee that your child(ren) or you will not become infected your child(ren)'s attendance at the Parish/School and/or participation in an /her/their risk, and yours, of directly or indirectly contracting COVID-19.
contagious nature of COVI by his/her/their attendance or infection may result in understand that the risk of Parish/School or participat and/or others including, b	19 Consent Form and Liability Waiver ("Agreement"), I acknowledge the ID-19 and that my child(ren) and I may be exposed to or infected by COVID-19 at the Parish/School and/or participation in any Activities and that such exposure a personal injury, illness, permanent disability, and even death ("Injury"). I of becoming exposed to or infected by COVID-19 during attendance at the ion in an Activity may result from the actions, omissions or negligence of myself ut not limited to, Parish/School employees and volunteers; third-party service and visitors at the Parish/School; and participants in an Activity and their families.
activities, I,	, and notwithstanding the risks associated with the COVID-19 virus and group, grant permission for my child(ren) named above to attend the pate in all Activities during the School Year, some of which may require a
heirs, successors and ass Roman Catholic Church agents and representativ attending the Parish/Sch connection with the neg	f of myself, my child(ren) named herein, and my spouse (if any), my/our signs, to release, indemnify and hold harmless the Parish/School and The of the Diocese of Baton Rouge, its/their members, directors, employees, res ("Indemnitees"), from all claims related to an Injury associated with nool and/or participating in one or more Activities and arising from or in gligent acts or omissions of the Indemnitees, but ONLY in regard to the d of the COVID-19 virus. I SPECIFICALLY ACKNOWLEDGE AND EGOING.
Signature:Print Name:	Date: