North Kingstown Recreation Hosts

Running Workouts: Grades 2-8

Pre-Registration Required. **No** Registrations will be done at program This program is for grades 2-8 (grade in Sept).

This program will focus on Distance, mid distance, Sprint, and full body workouts. Participants will workout to improve their overall running fitness.

Fee 40.00 resident \$44.00 non-resident

Tuesdays and Thursdays: October 20 - Nov 24

McGinn Park (football Field) 200 School St., NK 5:30 – 6:30 under the lights

In case of weather cancellation you will be emailed by 4:30 that evening. Rainline is 268-1543

Participants **must pre-register** to allow the instructor time to prepare, **NO WALK-INS please**. Cash or Make check payable to: <u>Town of North Kingstown</u> and mail to 100 Fairway Drive, attn Recreation, North Kingstown, RI 02852

We at NK Rec take your health and safety very seriously. We will be abiding by the State COVID Guidelines that are subject to change. Please only send ONE guardian with child for program. Children and Staff must wear a mask. Please have hand sanitizer available for individual use. There will be a screening at drop off, including temperature taking, please allow yourself an extra few minutes. If your child has a temperature or answers yes to any of the following questions, they will not be allowed to participate in the program that day:

- Are exhibiting any symptoms of the coronavirus: mild to severe respiratory illness with fever, coughing, difficulty breathing, or other symptoms identified by the CDC.
- Have been in contact with someone with COVID-19 in the last 14 days.
 - If you have a serious underlying health condition, including high blood pressure, chronic lung disease, diabetes, obesity, asthma, or whose immune system is compromised parental discretion for participation will be advised

Running workouts 2020 Grades 2-8 Oct/Nov

NAME		M F BIRTHDATE
SCHOOL	GRADE	
ADDRESS		028
EMAIL		_@
PRIMARY PHONE	CELL PHO	ONE
SERVICE PROVIDER	RI	ECEIVE TEXT NOTIFICATIONS? Y N
MEDICALPROBLEMS?		
EMERGENCY CONTACT NA	ME AND PHONE:_	
PARENT/GUARDIAN SIGNATURI	E	

TOWN OF NORTH KINGSTOWN RECREATION DEPARTMENT

100 Fairway Drive

North Kingstown, Rhode Island 02852

Phone (401) 268-1542

MINOR'S CONSENT TO PARTICIPATE AND HOLD HARMLESS AGREEMENT AND RELEASE

I, (Print Name of Minor's Parent or Legal Guardian)	state that
(Print Minor's Legal Name)	(hereafter referred to as "the
minor") the minor wishes to participate in (Print Name of	f Event or Program)
sponsored	by the North Kingstown Recreation Department (the "Recreation
Department").	
the minor does not have to participate. It is understood to injury to the minor's person or damage to the minor's guardian(s) voluntarily accept and assume the risk of injuthe minor's participation in the event or program. It is understood that the Recreation Department DOES property; and minor's parent(s) or guardian(s) acknow minor's own health care needs, and for the protection of In exchange for allowing the minor to participate in this agrees to release from liability, indemnify, and hold he employees for any injury to the minor's person or damages as a consequence of the minor's participation in the even been caused, in whole or in part, by any negligence or was officers, or employees. This Hold Harmless Agreement and Release shall be bind in interest, and/or any person(s) suing on the minor's between the minor's parent(s) or guardian(s) understand that this representations made to them concerning this docum Kingstown, its officers, agents and/or employees. PARENT OR LEGAL GUARDIAN MUST SIGN BELOW: I, the undersigned, state that I am the parent or legal gethat the above terms and conditions apply to said min participate under ANY circumstances in the above specific	s event or program, the minor by and through the undersigned armless the Town of North Kingstown, its agents, officers, and ge to the minor's property which arises out of or occurs during o ent or program, whether or not such injury or damage may have ant or care on the part of the Town of North Kingstown, its agents ding upon the minor, the parent(s) or guardian(s), any successors.
BY INITIALING I AGREE TO THE UNRESOLVED USE OF MY CHILD AND OTHER DEPICTIONS) FOR PUBLICIZING NORTH KINGSTOV	O'S NAME AND/OR LIKENESS (INCLUDING PHOTOGRAPHS, VIDEO TAPES IN RECREATION ACTIVITIES AND EVENTS
Minor's Name (PRINT):	Birth date of minor:
Home State of minor:	Today's Date:
Parent/Guardian Legal Name (PRINT):	
Parent/Guardian Legal Name (SIGN):	

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

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.

North Kingstown Rec Programming has put in place preventative measures to reduce the spread of COVID-19; however, NK Rec **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. Further, **attending NK Rec Programming, being exposed to the public, could <u>increase</u>** your risk and your child(ren)'s risk of contracting COVID-19.

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By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending NK Rec Programming 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 may result from the actions, omissions, or negligence of myself and others, including, but not limited to, NK Rec employees, volunteers, and program participants and their families even though North Kingstown Recreation is taking all possible precautions.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at NK Rec Programs or participation in NK Rec programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless NK Rec, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of programs, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any programming.

Signature of Parent/G	Guardian	Date	
Print Name of Parent/Guardian	Print Nam	e of Participant(s)	