



Volunteer Informed Consent

(per the Los Angeles Department of Rec And Parks)

Dear Volunteer,

The State of California recently announced that 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.

East Valley Baseball 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. Volunteers 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, accept, and agree to all the following:

- Participation in athletics is purely voluntary. *Initial:* _____
- Volunteer has reviewed all County and League protocols and agrees to assist League in maintaining full compliance. *Initial:* _____
- Volunteer will not attend meetings, practice and/or competitions if any of the following apply:
 - A. The Volunteer or any member of their household is exhibiting one symptom(s) of COVID-19 first appear 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 Volunteer will check their temperature at home prior to attending meetings, practices, and/or competitions; and will not attend if their temperature is at or over 100.4°F or 38°C.
 - B. The Volunteer or any member of their household has been diagnosed with COVID-19 or has a suspected diagnosis of COVID-19 or pending COVID test.
 - C. The Volunteer 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 Volunteer or any member of their household is currently under isolation or quarantine orders.

Initial: _____
- If the Volunteer tests positive for COVID-19 or has been identified as being exposed to an individual that has tested positive for COVID-19, the Volunteer agrees to immediately inform the EV League Office and acknowledges that East Valley Baseball must contact the Los Angeles County Department of Public Health (LACDPH) to provide information regarding the confirmed positive test, including Volunteer's name and contact information. I consent to East Valley Baseball providing such information to LACDPH or any other the administrative body as



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required by law. I agree to willingly cooperate with any contact tracing that is deemed necessary by East Valley Baseball and/or LACDPH. *Initial:* _____

- I am aware that Volunteers may be exposed to COVID-19 while participating in or attending meetings, practices and/or competitions. I understand that this exposure carries a risk of infection, serious illness, or death for both the Volunteer and their household members. *Initial:* _____
- I acknowledge East Valley Baseball, the Governor, State Department of Health, LACDPH, or other administrative body with authority over East Valley Baseball may determine to cancel a competition or the season at any time. I also acknowledge East Valley Baseball 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. *Initial:* _____
- I am 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. I agree to comply with the direction provided by the League and acknowledge that the failure to do so may result in my expulsion from East Valley Baseball. *Initial:* _____
- Volunteer is voluntarily participating in athletics and agrees to assume any and all risks of infection, injury, or death, whether those risks are known or unknown. *Initial:* _____

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE OF THE RISKS OF PARTICIPATING IN ATHLETICS DURING THE COVID-19 PANDEMIC. I AM AWARE THAT THIS FORM CONTAINS A RELEASE OF LIABILITY AND WAIVER OF ALL CLAIMS. I AM SIGNING THIS AGREEMENT VOLUNTARILY, FULLY AWARE OF THE RISKS AND MY RELEASE AND WAIVER OF ANY CLAIM AGAINST EAST VALLEY BASEBALL, ITS EMPLOYEES, VOLUNTEERS, AGENTS, BOARD MEMBERS, OR OTHER RELATED ENTITIES.

Volunteer Signature: _____

Printed Name: _____

Date: _____