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Acting Superintendent of Schools



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January 29, 2021

Re: SARS-CoV-2 Athletic Informed Consent

Participation in interscholastic athletics is voluntary and carries inherent risks. By permitting my child to participate, I am acknowledging that:

- Participation in the higher-risk sport places the student-athlete at risk of exposure to SARS-CoV-2.
- Symptomatic and asymptomatic individuals can spread the virus.
- Masking, distancing, and other mitigation measures reduce, but do not eliminate risk.
- At present, it cannot be predicted who will become severely ill if infected.
- SARS-CoV-2 can lead to serious medical conditions and death for people of all ages.
- The long-term effects of SARS-CoV-2 are, at present, unknown; even people with mild cases may experience long-term complications.
- There is a significant risk of transmission to those in the home of infected student-athletes.
- Older people and people with underlying health conditions are at higher risk of serious disease.
- A condition for ongoing participation will be full cooperation with case/ contact investigations and compliance with isolation/quarantine requests if indicated.
- Testing for COVID-19 is recommended by the Onondaga County Department of Health and I consent on behalf of child to such testing, if implemented.
- I have received medical clearance from my student athlete's healthcare provider.

By signing below, I am indicating that I have read and understand the specific warnings above and have been made aware of the potential dangers as a result of my child's participation in athletics. I also agree to comply with the sport specific safe return preparedness plan developed by the District.

I hereby give permission for my child to participate in interscholastic athletics and understand that the degree of danger and the potential of exposure to the SARS-CoV-2 varies significantly from one sport to another, with contact sports carrying the higher risk.

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*Parent/Guardian Signature*

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*Date*

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*Print Student's Name*

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*Sport*