

**City of Burbank  
Parks and Recreation Department  
SPORTS PARTICIPANT CONSENT FORM**

In compliance with the City of Burbank, State of California, and Los Angeles County Guidance for Youth and Adult Recreational Sport Leagues, outdoor moderate-contact sports can be played in the purple or red tier with an adjusted case rate equal to or less than 14 per 100,000 effective February 26, 2021.

The following conditions must be met to help ensure the safety of all staff, volunteers, coaches and/or participants. Please review the following requirements and necessary documents for reopening fields for youth and adult sports organizations.

By initialing and signing this Informed Consent Agreement, you acknowledge, accept, and agree to all the following (Athlete and, if the Athlete is a minor, Parent/Guardian Must Initial and Sign):

*Please initial each item to indicate that you agree to implement and uphold these requirements during your permitted use.*

**INFORMED CONSENT**

\_\_\_\_\_  
PARENT  
INITIAL

\_\_\_\_\_  
ATHLETE  
INITIAL

- Participation in athletics is purely voluntary. Provide information regarding risk to all volunteers, coaches, staff, participants, and parents/guardians of minors participating in such sports and have each sign an informed consent indicating their understanding and acknowledgment of the risks indicated herein.

**FACE COVERINGS**

\_\_\_\_\_  
PARENT  
INITIAL

\_\_\_\_\_  
ATHLETE  
INITIAL

- Enforce face coverings be worn by all participants at all times including during practice, conditioning, competition, on the sidelines, and even during heavy exertion as tolerated.
- Enforce face coverings be worn by coaches, volunteers, support staff and spectators at all times, and in compliance with the LACDPH Guidance for the Use of Face Coverings.

**PHYSICAL DISTANCING**

\_\_\_\_\_  
PARENT  
INITIAL

\_\_\_\_\_  
ATHLETE  
INITIAL

- Maintain at least six feet of distance between sport participants and others to the maximum extent possible, including when on the sidelines.
- Maintain at least 6 feet of distance between coaches and participants. Authorized spectators must maintain at least 6 feet from non-household members.

**HYGIENE AND EQUIPMENT SANITATION**

\_\_\_\_\_  
PARENT  
INITIAL

\_\_\_\_\_  
ATHLETE  
INITIAL

- When equipment is shared during an activity, participants perform hand hygiene (wash hands with soap and water or use an alcohol-based hand sanitizer) before play, during breaks, at half time, and after the conclusion of the activity. Balls can be touched by multiple players during practice and play if the above hand hygiene practices are followed. Shared helmets and bats must be wiped down with a disinfectant between each use. No sharing of drink bottles and other personal items and equipment.

**LIMITATIONS**

\_\_\_\_\_  
PARENT  
INITIAL

\_\_\_\_\_  
ATHLETE  
INITIAL

- Any areas where participants are seated off-field or off-court (e.g., bench, dugout, bullpen) will be reconfigured to create additional seating such that participants are able to maintain a physical distance of 6 feet while in the area
- Mixing with other households prior to and post any practice or competition must strictly adhere to current gathering guidance.
- Observers are not permitted for adult recreational sports.
- Limit observation of youth sports (age 18 years and under) to immediate household members, and for the strict purpose of age appropriate supervision. This includes observation of practice and competition. Limit number of observers to ensure physical distance can be maintained, reduce potential crowding, and maintain indoor and outdoor capacity limits.

**ONLY ONE COMPETITION, PER TEAM, PER DAY MAXIMUM TO BE PLAYED.**

\_\_\_\_\_  
PARENT  
INITIAL

\_\_\_\_\_  
ATHLETE  
INITIAL

- Teams must not participate in out-of-state games and tournaments.
- Inter-team (league) competitions are authorized only if
  - (a) both teams are located in the same county and the sport is authorized; or
  - (b) teams are located in immediately bordering counties and the sport is authorized in both counties.
- Any tournaments or events that involve more than two teams are NOT currently permitted in California.

---

## **INDIVIDUAL COVID RESPONSIBILITIES**

I will not attend meetings, practice and/or competitions if any of the following apply:

I, or any member of my 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. I will check my temperature at home prior to attending meetings, practices, and/or competitions; and will not attend if my temperature is at or over 100.4°F or 38°C.

I, or any member of my household have been diagnosed with COVID-19 or have a suspected diagnosis of COVID-19 or pending COVID test within the last 10 days.

I, or any member of my household have spent time with another individual who have been diagnosed with COVID-19 or have a suspected diagnosis of COVID-19 within the last 10 day.

I, or any member of my household are currently under isolation or quarantine orders

If I test positive for COVID-19 or have been identified as being exposed to an individual that has tested positive for COVID-19, I agree to immediately inform **City of Burbank** and acknowledges that the **City of Burbank** must contact the Los Angeles County Department of Public Health (LACDPH) to provide information regarding the confirmed positive test, including my name and contact information. I consent to the **City of Burbank** providing such information to LACDPH or any other the administrative body as required by law. I agree to willingly cooperate with any contact tracing that is deemed necessary by the **City of Burbank** and / or LACDPH.

I understand that I 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 myself and my household members.

I acknowledge **City of Burbank**, the Governor, State Department of Health, LACDPH, or other administrative body with authority over **City of Burbank** may determine to cancel a competition or the season at any time. I also acknowledge **City of Burbank** 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.

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 coverings. I agree to comply with the direction provided by the City of Burbank Sports staff and acknowledge that the failure to do so may result in me being refused participation at practice, competitions, and/or the entire sport season.

I am voluntarily participating in athletics. I agree to assume any and all risks of infection, injury, or death, whether those risks are known or unknown. **I agree to DEFEND, INDEMNIFY, AND HOLD HARMLESS THE CITY OF BURBANK AND ANY OF ITS OFFICERS, AGENTS, SERVANTS OR EMPLOYEES, FROM ALL LIABILITY, LOSS, OR HARM THAT MAY OCCUR BY REASON OF MY PARTICIPATION IN THE SPORTS PROGRAM, including any and all risks of infection, injury, or death, whether those risks are known or unknown.**

I/WE HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I/WE AGREE TO ABIDE BY ALL LOS ANGELES COUNTY PROTOCOLS FOR YOUTH AND ADULT RECREATIONAL SPORT LEAGUES OUTLINED HERE AND AS UPDATED BY THE LOS ANGELES COUNTY HEALTH DEPARTMENT. I/WE ARE AWARE OF THE RISKS OF PARTICIPATING IN ATHLETICS DURING THE COVID-19 PANDEMIC. I AM/WE ARE AWARE THAT THIS FORM CONTAINS A RELEASE OF LIABILITY AND WAIVER OF ALL CLAIMS. I AM/WE ARE SIGNING THIS AGREEMENT VOLUNTARILY, FULLY AWARE OF THE RISKS AND RELEASE AND WAIVER OF ANY CLAIM AGAINST THE CITY OF BURBANK, ITS EMPLOYEES, AGENTS, BOARD MEMBERS, OR OTHER RELATED ENTITIES.

---

Team Name and Division

---

Participant Name *(please print)*

---

Participant/Guardian Signature

---

Date

Please return a signed copy of this form to the Sports Office. For additional information please contact the Sports Office at (818) 238-5330.