

2021-2022 North Paulding High School
Youth League Proposal- Safety Plans and Procedures

Registration:

- **Registration will begin on 10/4 and will be open for 4 weeks. There will be a registration cap in each of the two groups**
- **We will run a K-3 group and a 4-8 group this season. They will practice 2 days a week. The practice schedule will be determined after we know our final numbers.**
- **All registration will be completed digitally this year including fee payment through PayPal**

As part of registration additional language will be added to the waiver to include waiving of liability in regards to Covid-19, as well informing of the responsibility of screening individuals being the parent/guardians. The language at the end of this document is what will be a part of the registration form:

Practice Procedures:

- **The first practice is currently planned for 11/1, although this could change.**
 - o Practices will be held in the NPHS Wrestling room from 6:30-8:00pm

The parent/guardian will be responsible for screening members of the Wolfpack Wrestling Club. Coaches will need to screen and temp check themselves as well. Any other spectators will need to screen themselves before entering a school building.

The questions below will be used to conduct the screening. Parents/Guardians will also be responsible for checking temperatures.

1. In the past 2 weeks have you traveled to a hot spot for covid-19?
2. In the past 2 weeks have you had a cough, fever, sore throat, or shortness breath?
3. In the past 2 weeks have you been exposed to anybody who has tested positive for Covid-19?
4. In the past 2 weeks have you been diagnosed with, or waiting on the test results of, Covid-19?
5. Temperature has been checked, and is below 100.4°F.

If they cannot pass the screening, they need to contact Coach Prince to inform him of this information. If a participant is a close contact to a Covid-19 positive individual, they will not be allowed to participate in Wolfpack Wrestling Club activities until they have quarantined for 14 days and are symptom free. If the participant has tested positive for Covid-19 they will be required to quarantine for 10 days. These guidelines are based off CDC and Department of Health and are subject to a change in their guidelines. Will work with our school/AD to determine if or when it may be necessary for individuals/teams to sit out.

- A North Paulding High School Coach or custodian, at the end of practices, will fog each area that is used after all practices are completed at the end of each day.

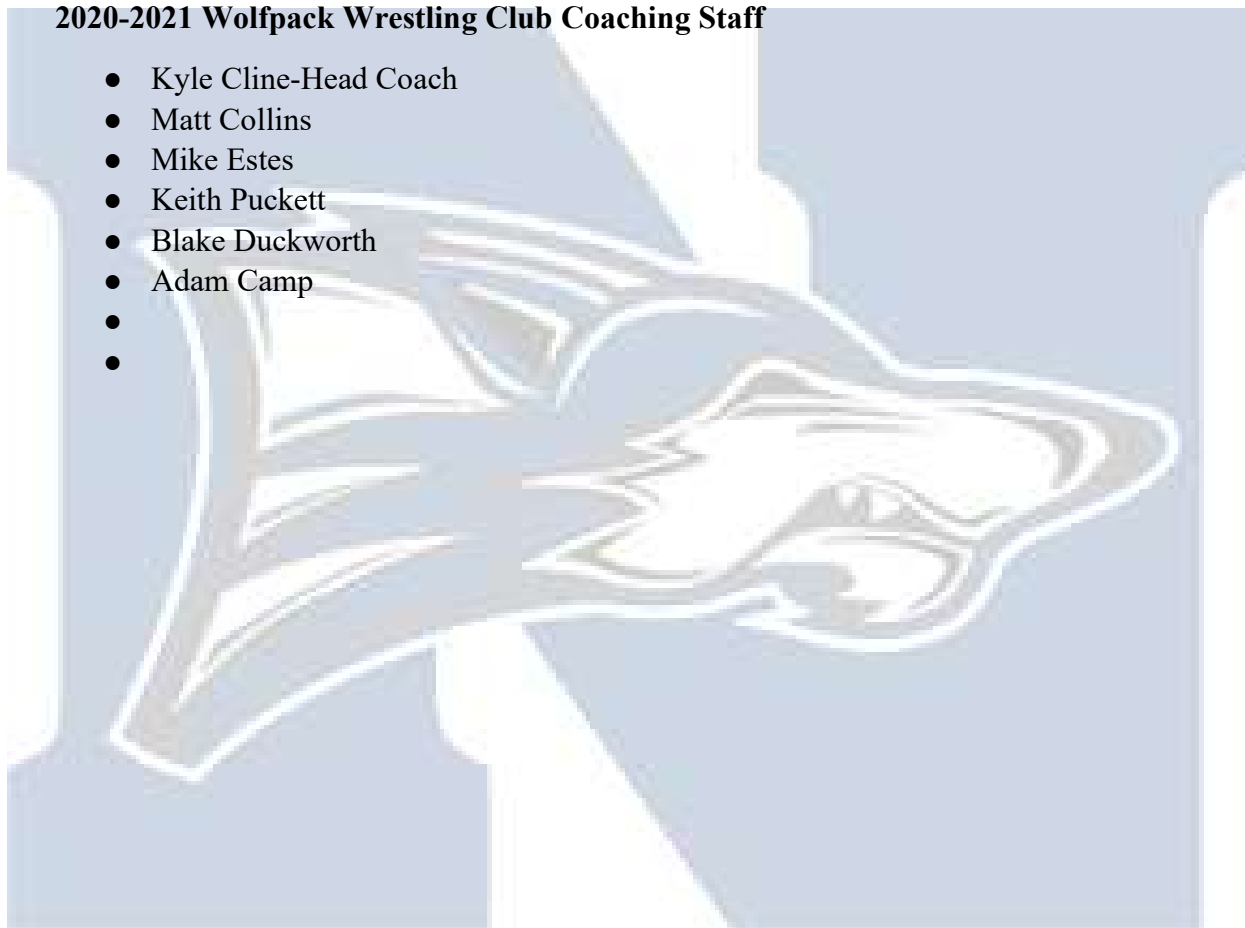
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- Parents will be asked to limit attendance in practices and we will ask that only 1 person per athlete participating enter the building for practice and avoid congregating in the hallway. If possible please wait outside of the building for your child.
- We will also ask, but not require, spectators and coaches to wear a mask while in the buildings and follow social distancing and DPH guidelines as much as possible.
- This will likely be a season of just practice and training. Match nights may not be an option this year. Of course if you choose to do so USA Wrestling tournaments are an option or competition.
- Players will be allowed to wear a mask for practice if they want to.

2020-2021 Wolfpack Wrestling Club Coaching Staff

- Kyle Cline-Head Coach
- Matt Collins
- Mike Estes
- Keith Puckett
- Blake Duckworth
- Adam Camp
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WAIVER / HOLD HARMLESS AGREEMENT

I/we agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, do release and waive any and all claims for damages or injury which I/we or our child may have received, so as to release and discharge in advance those parties hereinafter named and further agree to indemnify, hold harmless and release from liability and defend the North Paulding Takedown Club, the Wolfpack Wrestling Club, North Paulding athletics, North Paulding High School, school facilities within Paulding County, the Paulding County School district, and ALL related entities, et al, hereinafter referred to as the "Organization," to relieve their officers, directors and agents, volunteers and the chaperones, and/or representatives, and/or related entities or persons, from any and all liability arising from or in connection with my child participating in athletics or in connection with any illness or injury or cost of medical treatment in connection therewith. I acknowledge that the sport of wrestling may contain certain risks, including all of the hazards inherent in sports and also including the risks of falling, collision with other participants or stationary objects, and risks arising from a dangerous condition, use, structure or activity on the court or in the building. My child's participation is voluntary and done at my child's own risk. I voluntarily assume all risks of loss, damage, illness or injury that may be sustained while my child participates in this sport and on this team. I recognize that an event of this nature can be physically demanding. I acknowledge and accept that it is my responsibility for any existing medical condition that my child may have which may be affected by participating in basketball with the "ORGANIZATION", I acknowledge their may be a recommendation that I consult with a physician regarding the advisability of my child's participation in this activity. **Any injury or illness contracted during participation with the "ORGANIZATION", whether from a previous underlying condition or not, is the sole responsibility of the parent or guardian signing this document.**

I understand and agree that medical or other services rendered to my child by or at the request of any of the above parties is not an admission of liability to provide or to continue to provide any such services, and is not a waiver by any of said parties of any right hereunder. I am granting the organization's coaches and/or related staff the right to make immediate, emergency decisions regarding health matters such as the decision to take my child to the hospital

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due to injury or illness if I am not present to make such a decision at that time. I understand that serious accidents may occur during wrestling practice and events, and that participants in this event may sustain serious injury or illness as a consequence thereof. Nevertheless, I agree to assume these risks and to discharge, release and hold harmless all of the persons involved as surrogates, custodians, chaperones, or any other granted authority by the "ORGANIZATION," or for damages to my children themselves, and hold them harmless and not liable for any said injury or illness or damages related thereto. I agree to abide by the rules of the organization as established by "ORGANIZATION" and that my child(ren) will obey the directions of the coaches, the rules of the team, and all related organization officials. I authorize the "ORGANIZATION" staff and related persons the right to administer general first aid treatment for minor injuries or illnesses experienced by my participant child except where any such first aid treatment is specifically excluded in writing and attached to this agreement. I authorize the "ORGANIZATION" staff and related persons, in the event that I cannot be contacted or if any urgency dictates, to act in loco parentis for the Child in respect of any circumstances, including any accident or illness, which may necessitate medical treatment. i hereby accept full liability for all costs incurred through such medical treatment for the child.

COVID-19 – with respect to the novel coronavirus, my signature on this document is a full attestation that I am solely responsible and assume all of the risks associated with my decision to allow my child to participate, and I am voluntarily allowing my child to participate, in "ORGANIZATION" athletic events. I am also attesting to applying a minimum of Covid-19 protocols such as checking for fever and symptoms prior to each time I allow my child to attend and participate in athletic events. By signature below, I attest to being the sole responsible party for the application of virus mitigation protocols and that my child does not have evidence of the Covid-19 virus at the time I participate in athletic events, or I will withhold him/her from said event.

I agree that the terms of this Agreement and Waiver shall apply directly to the signatory. This agreement is not one of limitation and any and all circumstances surrounding the risk of injury or illness to my child during their participation with the "ORGANIZATION" I shall thereby release the organization of all liability related thereto and hold them harmless. I have read and understand everything written above, and I voluntarily sign this agreement. **THIS RELEASE MUST BE SIGNED BY AT LEAST ONE (1) PARENT OR GUARDIAN WITH THE LEGAL AUTHORITY TO REPRESENT THE INTERESTS OF THE PARTICIPATING CHILD IN QUESTION.**

Print Name of Child _____

Print Name of Parent or Guardian _____

Signature of Parent or Guardian _____

Date _____

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NPHS Athletic Director Signature

Date:

NPHS Principal Signature

Date:

