

Sanlando Christian School COVID-19 Parental Acknowledgment and Disclosure

This statement should be read by all parents and guardians. Each line must be initialed by one parent or guardian, and signature of one parent or guardian is required.

1. _____ I understand that during this COVID-19 Public Health Emergency I will be permitted to enter the facility as long as I maintain 3' distance from others and I am free of symptoms (see #2). I understand that this is for the safety of all persons present in the facility and to limit to the extent possible everyone's risk of exposure. I understand that it is my responsibility to inform any Emergency Contact persons of the information contained herein.

2. _____ I understand that to attend the program my child must be free from COVID-19 symptoms, as well as other common symptoms of illness (i.e. nausea, vomiting, diarrhea, excessive nasal discharge, or unexplained rash). If, during the day, any of the following symptoms appear my child will be separated from the rest of the children. I will be contacted, and my child **MUST** be picked up from the facility within 60 minutes of being notified.
Symptoms of COVID-19 include:
 - Fever at or above 100.4 F
 - Cough (frequent or not manageable)
 - Shortness of breath
 - Chills
 - Loss of taste or smell
 - Sore throat
 - Muscle aches
 - Any other symptom identified by the CDC as associated with COVID-19

While we understand that many of these symptoms can also be related to non-COVID-19 related issues, we must proceed with an abundance of caution during this Public Health Emergency. These symptoms typically appear 2-7 days after being infected so please take them seriously. **Your child will need to be symptom free without any medications for 48 hours before returning to the facility.**

3. _____ I understand that my child's temperature may be taken throughout the day while on facility premises.

4. _____ I understand that my child will be required to wash their hands using CDC recommended handwashing procedures throughout the day, using running water and rubbing with soap for at least 20 seconds.

5. _____ I understand that lunches should be brought in a metal or plastic box or bag, with an ice pack to protect perishable items. Items from home should be limited to backpacks, a change of clothing, lunch, reusable water bottle, and comfort object (for 2-year-olds).

6. _____ I understand that in order to minimize my child's exposure in the community, our family will comply with any and all state, county or local mandates and will maintain distance from people outside our household whenever possible. I understand that outdoor gatherings are safer than indoors.

7. _____ I agree to reinforce good health and safety habits at home, including reminding my child to keep their hands away from their face, to wash hands frequently for 20 seconds, and to cover coughs and sneezes.

8. _____ I will immediately notify the Sanlando Christian School office if:
 - a) My child or a member of our household exhibits any of the symptoms listed in #2 above.
 - b) I become aware that any person with whom my child or I have had contact is advised to self-isolate, quarantine, has tested positive, or is presumed positive for COVID-19.

9. _____ Sanlando Christian School will continue to monitor the guidelines of the CDC, state and local officials to ensure the health and wellbeing of all staff and children who enter the facility. As procedural changes occur, families

will be notified. Sanlando Christian School must notify the Health Department if any staff member or student contracts COVID-19 to determine whether any portion of the facility needs to be closed and for what period of time. Sanlando Christian School reserves the right to change or suspend operating procedures in light of guidance from the CDC, state & local authorities or our accrediting agency.

10. _____ I understand that while present in the facility my child will be in contact with children, families and other employees who are also at risk of community exposure. I understand that no list of restrictions, guidelines or practices will remove 100% of the risk of exposure to COVID-19 as the virus can be transmitted by persons who are asymptomatic and before some people show signs of infection. I understand that I play a crucial role in keeping everyone in the facility safe and reducing the risk of exposure by following the practices outlined herein.

I, _____ certify that I have read, understand, and agree to comply with the provisions listed herein. I acknowledge that failure to act in accordance with the provisions listed herein, or with any other policy or procedure outlined by Sanlando Christian School will result in adverse action up to and including termination of my child's participation in this program.

1st Child's Name: _____

DOB: _____

2nd Child's Name: _____

DOB: _____

Parent/Guardian's Name: _____

Parent/Guardian Signature

Date

Management Team Witness

Date