

St. Luke's Preschool

COVID-19 Parent Acknowledgement Acknowledgement and Disclosure 2020-2021 School Year

*Revisions per CDC and VDSS regarding quarantine guidelines as of December 30, 2020:

Please read and initial each statement below. Both parents must initial:

1. ____ I understand that if there is a situation which requires me to enter the facility beyond the designated drop-off and pick-up area I must wash my hands before entering, and I must wear a mask. While in the facility and during drop off/pick up time, I must practice social distancing and remain 6ft from all other individuals except for my own child.
2. ____ I understand that to enter the facility my child must be free from COVID-19 symptoms. If, during the day my child begins to display any of the following symptoms, or begins to display obvious signs of unwellness he/she will be separated from their class and will be taken to the designated area to rest or play until he/she is able to be picked up. I will be contacted, and my child must be picked up from the facility within 30 minutes of being notified.

Symptoms may include the following:

- Fever of 100.4 degrees Fahrenheit or higher
- Persistent cough
- Chills
- Shortness of breath
- Fatigue/ muscle aches
- Sore throat
- Nausea
- Diarrhea
- Loss of taste or smell
- Headache
- Flu like symptoms.

While we understand that many of these symptoms can also be related to non COVID-19 issues, we must proceed with an abundance of caution during this Public Health Emergency. The symptoms typically appear 2-14 days after being infected so please take them seriously. **Your child will need to be symptom free without any medication for 72 hours before returning to the facility.**

3. ____ I understand that my child's temperature will be taken upon arrival each day, and I can affirm the three points listed on the Health Acknowledgement Form (see attached). It is my responsibility to share any information regarding any of these three points.

4. _____ I understand that while present in the facility each day 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 minimizing risk of exposure.
5. _____ I understand that if my child has been in close contact with anyone experiencing symptoms related to Covid 19 or to anyone that has tested positive for Covid 19, he/she will be required to quarantine for 14 days (after the last contact with positive exposure). A physician's note clearing the child before he/she is able to return is also required. Close contact is defined by the CDC as a direct physical contact with the person (hugged or kissed them), shared eating or drinking utensils, or prolonged exposure.

*Revision per CDC and VDSS states that: "Children and staff with close contact with others who are known to have COVID-19 be excluded from the childcare facility for at least 10 days"

**We still require the physician's note as described above.*

6. _____ I understand that if there is a positive case within the preschool, the director will notify local health officials at the Virginia Department of Health. These officials will coordinate with us to determine a specific course of action that is appropriate for our preschool.
7. **Assumption of Risk:** By signing below, I hereby acknowledge (on my behalf and on the behalf of the child (children) named below that in choosing to attend St. Luke's Preschool for the 2020/2021 school year, I (or my child) may be exposed to, and /or increase my risk of contracting or spreading Covid 19. The employees and board members of St. Luke's United Methodist Church and Preschool cannot prevent me (or my child) from becoming exposed to, contracting, or spreading Covid 19 while utilizing their facility. I hereby assume the risk of such exposure to, contracting, or spreading Covid 19

Both parents must sign below: (If parents have separate households, each parent in which the child resides with, must sign below, but can sign on separate forms.)

We, _____, _____ certify that we have read, understand and agree to comply with the provisions listed herein. I acknowledge that the failure to act in accordance with the provisions listed herein or with any other policy or procedure outlined by St. Luke's Preschool could result in possible removal from our program.

Child's Name: _____

Parent's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____