

COVID-19 RELEASE AND WAIVER OF CLAIMS ("Release")

The undersigned, in my capacity as parent or legal guardian, hereby acknowledge they have been informed of the health risks and dangers associated with the transmission of the COVID-19 virus, and other communicable diseases, and recognize that exposure to the COVID-19 virus, or other communicable diseases, while unlikely, could occur if my child participates in-person in an (Agency Name) Program.

All (Agency Name) employees follow strict health protocols to ensure the health and safety of all clients and their families. Masking, social distancing, temperature checks, environmental cleaning and other attempts to mitigate risk are all part of program delivery until further notice.

As such, and in consideration for the services to be provided by (Agency Name), the undersigned, for myself and my minor child(ren), acknowledge that virtual program supports have been offered in lieu of in-person services and I have chosen to receive at least some of my services in-person. (In-person services may be offered outside, at an (Agency Name) center playroom or another mutually agreed upon site.) Therefore, I fully assume all of the risks associated with participation in the Program, including the possibility of COVID-19 (or the novel coronavirus) community spread, for myself and my minor children.

I, AS PARENT AND/OR LEGAL GUARDIAN, HAVE READ (OR HAD READ TO ME) THE CONTENTS OF THIS RELEASE AND AGREE THAT I AM VOLUNTARILY WAIVING, RELEASING, INDEMNIFYING AND DISCHARGING THE (Agency Name), ITS DIRECTORS AND EMPLOYEES FROM ANY AND ALL LIABILITY, DAMAGES, AND EACH AND EVERY ACTION (COLLECTIVELY, "CLAIMS") BY PARTICIPATION IN AND/OR ASSOCIATED WITH THE PROGRAM INCLUDING, BUT NOT LIMITED TO EXPOSURE OR TRANSMISSION OF THE COVID-19 VIRUS.

I represent that I have full authority to sign on behalf of my child(ren) and that my signature binds each other person having authority to make decisions on behalf of the child(ren).

MY SIGNATURE BELOW IS CONFIRMATION THAT I HAVE READ AND FULLY UNDERSTAND AND ACKNOWLEDGE THE CONTENTS OF THIS RELEASE.

Parent Name (please print)	
Parent Signature	Date
Child(ren) Names:	