

SOUND BEACH DAY SCHOOL

Assumption of Risk and Release/Waiver Relating to COVID-19, Coronavirus and Other Illness

Student Name: _____ (the “Student”)

Parent(s)/Legal Guardian(s) Name(s): _____

SBDS has decided to reopen beginning on May 26, 2020 and, in so doing, will follow the rules, regulations and guidelines established by state and local health departments, and the Connecticut Office of Early Childhood.

Notwithstanding the precautions implemented by SBDS as recommended by state and local health departments and the Connecticut Office of Early Childhood, by signing below, you acknowledge and agree to familiarize yourself with any current illness and take any and all reasonable precautions to avoid contracting or spreading COVID-19 or Coronavirus or any other illness or condition and, (i) to comply with all federal, state and local laws, orders and guidelines, including social distancing guidelines and guidelines established by SBDS, currently or projected to be in effect related to COVID-19 or Coronavirus or any other illness or condition; (ii) to exercise reasonable care to protect the Student and those with whom the Student interacts on a daily basis from contracting COVID-19 or Coronavirus or any other illness; (iii) to assess the Student’s health as well as your health and the health of those with whom the Student interacts on a daily basis prior to sending the Student to SBDS each day; and (ii) to assess the potential risk of contracting COVID-19 or Coronavirus or other illnesses as a result of sending the Student to SBDS each day. This list is for illustration purposes only and is not intended to list all reasonable precautions that should be taken before sending the Student to SBDS each day.

For each day that the Student is sent to SBDS, you represent that, to the best of your knowledge and information, neither the Student, nor anyone with whom the Student has recently interacted, is currently ill, or has a fever, persistent cough, shortness of breath or any other COVID-19, Coronavirus or any flu like or other contagious symptoms.

By signing below, you acknowledge and agree that, by sending the Student to SBDS each day, you are assuming the risk, on behalf of the Student, yourself and others with whom the Student comes into contact, of contracting COVID-19 or Coronavirus or other illnesses or conditions.

With appreciation of the risk of coming into contact with or contracting COVID-19 and/or Coronavirus as a result of sending the Student to SBDS, on my own behalf and/or on behalf of my child, the above-named Student, I hereby fully and completely release and waive any and all claims arising out of or relating to COVID-19 and/or Coronavirus or other illnesses, that may arise against SBDS, including its employees, members, officers, directors, and any other persons affiliated with SBDS.

The undersigned hereby declares that he/she has read and understands this Assumption of Risk and Release/Waiver Relating to COVID-19, Coronavirus and or other illnesses, voluntarily chooses to send the Student to SBDS, and agrees to the release/waiver provisions contained herein, both on behalf of the above-named Student and his/her parent(s)/legal guardians(s).

Parent/Legal Guardian Name and Signature

Date

Parent/Legal Guardian Name and Signature

Date