

St. Francis Creche Preschool
LIABILITY WAIVER FORM

As parent or legal guardian of _____,

I, _____, hereby agree to the following:

That my child(ren) is/are participating in the St. Francis Creche preschool program. I understand that while participating in the preschool program at St. Francis Creche Preschool, my child(ren) will be supervised by St. Francis Creche Preschool Staff.

St. Francis Creche Preschool has put in place measures to reduce the spread of COVID-19. I understand St. Francis Creche Preschool and St. Francis Episcopal Church, however, cannot guarantee that my child(ren) and/or family will not become infected with COVID-19. I understand, that while participating in the preschool program each day, my child(ren) will be in contact with people who are also at risk for 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 people who are asymptomatic and/or before some people show signs of infection. I understand that my family and I play a crucial role in keeping everyone participating in the preschool program safe and reducing the risk of exposure by following the practices outlined herein.

I also acknowledge that children can get hurt while playing with other children and while engaging in physical activities, and that there is a risk of property damage or injury inherent in my child(ren) participating in the preschool program's activities. I, my heirs, or legal representatives irrevocably covenant not to sue and forever release, waive and discharge any other claims of any kind whatsoever against St. Francis Creche Preschool and St. Francis Episcopal Church, for any personal injury, property loss or damage, whether caused by negligence or otherwise.

By signing this form, I acknowledge the contagious nature of COVID-19 and on behalf of myself, my child(ren), my spouse/co-parent voluntarily assume the risk that my child(ren) and I, and/or any member of my family, may be exposed to or infected by COVID-19 while participating in the preschool program.

I _____ certify that I have read, understand, and agree to the terms and conditions listed herein. I acknowledge that failure to act in accordance with the provisions listed herein, or with any other policy or procedure outlined by St. Francis Creche Preschool, will result in termination of services. I acknowledge that instruction for my child will be terminated if it is determined that my actions, or lack of action, unnecessarily exposes the instructor, another child, or their family member to COVID-19.

PARENT/GUARDIAN Signature:

Date: _____