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COVID-19 INFORMED CONSENT

The novel coronavirus, COVID-19, is an infectious, potentially life-threatening disease declared by the World Health Organization to be a global pandemic. There is no current vaccine or medication for COVID-19 or its related illnesses (“COVID-19”). COVID-19’s highly contagious nature means that exposure to others or contact with surfaces that have been exposed to the virus can lead to infection. Individuals who have COVID-19 may not show any symptoms, even if they are contagious. It is currently very difficult to control the spread of COVID-19 or to determine whether, where, or how a specific individual may have been exposed to the disease. For more information on COVID-19, visit the websites of the Centers for Disease Control and Prevention (<https://www.cdc.gov/coronavirus/2019-ncov/index.html>) or the California Department of Public Health (<https://covid19.ca.gov/>).

Aware of the foregoing, I am voluntarily agreeing to have my child,
_____, return to the campus of Casa di Mir Montessori School (hereinafter “School”).

I understand that the School has implemented safety rules and precautions in order to mitigate the spread of COVID-19. However, those measures do not completely protect against the spread of COVID-19. Moreover, it may not always be possible for students to follow social distancing and other precautions such as maintaining a six-foot distance from one another.

I agree that I and my child must comply with such rules and precautions which may include, but are not limited to, mask wearing, hand washing, hand sanitizing, and social distancing. I understand these rules and precautions may need to be adjusted throughout the course of the school year, as information about COVID-19 evolves. I acknowledge that even if my child and I follow all directions, instructions, and rules and exercise utmost personal care, there will remain a certain irreducible inherent risk to me and my child, and I accept that risk.

I agree that if my child is exhibiting symptoms of respiratory illness, a fever of 100.4°F or higher, or any other known symptoms of COVID-19, my child will not attend or return to School until my child has satisfied the School’s policy to return to School after exhibiting symptoms of COVID-19. I agree that I will immediately inform the School if my child tests positive for COVID-19 or has been exposed to anyone who has tested positive for COVID-19 in the prior 14 days.

By signing this agreement, I acknowledge the contagious nature of COVID-19, the fact that it can be difficult to identify, and the inherent risks of my child and I being exposed at the School to those who may be infected with COVID-19, including School employees, agents, contractors, volunteers, or other students. I voluntarily assume the risk that my child or I may be exposed to

or infected by COVID-19 by entering the School's campus and that such exposure or infection may result in personal injury, serious illness, permanent disability, and/or even death.

I understand and acknowledge that given the unknown and evolving nature of COVID-19, it is not possible to fully list each and every individual risk of contracting COVID-19.

I HAVE READ AND UNDERSTAND THIS AGREEMENT

PARENT OR LEGAL GUARDIAN OF STUDENT:

DATE:

PARENT OR LEGAL GUARDIAN OF STUDENT:

DATE:

Please sign and return this document to Casa di Mir by October 19, 2020