

Fredericksburg Preschool, Inc.
COVID-19 Health Pledge and Release
School Year 2021-22

Fredericksburg Preschool, Inc.'s (FPI) highest priority is to provide a safe, healthy and positive play-based learning environment for our students, members, families and staff. In response to the ongoing COVID-19 pandemic, we have created this Health Pledge and Release to do our part to help control the spread of COVID-19 and to keep our preschool community, as well as the greater Fredericksburg community, safe and healthy. This effort will require our individual and collective action to ensure we protect ourselves and each other. By signing this document, you agree to abide by the following guidelines that are based upon the recommendations of the Centers for Disease Control and Prevention (CDC), the Virginia Department of Health (VDH), the Rappahannock Area Health District (RAHD) and the regulations of the Virginia Department of Social Services (DSS). These guidelines may be modified based upon updated recommendations from these entities. FPI will make all efforts to communicate any modifications to you in a timely manner.

I PLEDGE, for myself and my household, to comply with the following guidelines:

1. Stay current with updated information regarding COVID-19 from the CDC, VDH and RAHD.
2. Comply with the recommendations of the CDC, VDH and RAHD as it pertains to COVID-19 and other public health concerns.
3. Abide by all guidelines as communicated or posted by FPI.
4. Avoid crowds and large gatherings, especially those held indoors.
5. Maintain appropriate physical distancing of at least 6 feet in public settings, when possible.
6. Practice good hygiene, including frequent hand washing with soap and/or using hand sanitizer.
7. Follow all quarantine guidelines as outlined by the CDC, VDH and your local health district if you or any household member travel outside of the Commonwealth of Virginia.
8. Practice daily health monitoring, including temperature checks, and if anyone in your household is experiencing any symptoms of illness, keep your child at home and follow testing guidelines of the VDH and/or your local health district before returning to FPI.
9. Notify FPI's Director and President immediately if a member of your household tests positive for COVID-19 or has been exposed to someone who has recently tested positive for COVID-19, and cooperate with your local health department for contact tracing purposes.

I understand that any egregious and/or repeated violation of this Health Pledge could result in dismissal from FPI without reimbursement, at FPI's discretion.

I have read this document in its entirety and I understand and accept all of its terms and conditions.

Parent Signature Printed Name

Date

RELEASE

I acknowledge and understand the following:

1. Enrollment in and participation at FPI is voluntary and includes possible exposure to, and illness from, infectious diseases including, but not limited to, COVID-19. I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that _____ (*child's name*) and/or I may be exposed to or infected by COVID-19 by attending or visiting FPI, and that such exposure or infection may result in injury, illness, permanent disability or death; and
2. On behalf of myself and _____ (*child's name*), I hereby release, waive, covenant not to sue, discharge and hold harmless FPI, its employees, agents and representatives, of and from any and all claims, demands, suits, judgments, losses liabilities, actions, damages, costs or expenses of any kind arising out of, or relating to, directly or indirectly, the infection of COVID-19. I understand and agree that this Assumption of Risk and Release includes any claims based on the actions, omissions or negligence of FPI, its employees, agents and representatives, whether a COVID-19 infection occurs before, during or after participation in any FPI program.

I have read this document in its entirety and I understand and accept all of its terms and conditions.

Parent Signature Printed Name

Date