

Kinder Works
www.Kinderworks.net

COVID-19
ACKNOWLEDGMENT AND DISCLOSURE

Dear Parents:

This document, and the *Corvid-19 Procedures for Parents*, is referenced on the **Covid-19 Signature Page, which must be read & signed (digitally on the Registration page of our website), and anyone else designated to pick up/drop off during this time must review both of these documents with you.** (These are also available as pdfs on our website on the Registration pages).

Please read each statement below. Thank you.

1. I understand that I should enter and leave the facility following signs, and use designated drop-off and pick-up areas, following signs. My child and I must use hand sanitizer before entering. (Sanitizer stations are at the entrance, by the keypad, to use in case you don't have your own). My child and I must wear a mask indoors, and remain 6 ft. from others whenever possible, except for my own child.
2. I understand that to enter upon the facility premises my child and I must be free from COVID-19 symptoms. During the day, if any of the following symptoms appear, my child will be separated from the rest of the people in the center. I will be contacted, and my child must be picked up from the facility **within 30 minutes** of being notified. If I cannot pick up in time, I will designate someone who can and communicate this to you immediately.

Symptoms include,

- fever of 100.4 degrees Fahrenheit or higher
- dry cough
- Shortness of Breath
- Chills
- Loss of taste or smell
- Sore Throat
- Muscle aches

While we understand that many of these symptoms can also be related to non-COVID-19 issues, we must proceed with an abundance of caution at this time.

3. I understand that, if my child is over 2 years old, pursuant DOH, AAP OCDEL and CDC recommendations (which have varied in emphasis), my child will be encouraged to wear a mask indoors whenever possible and practical, and especially when distancing is difficult to maintain.
4. I understand that throughout the day, at least every 45 minutes, and more often as needed, my child will be required to wash his/her hands using CDC recommended handwashing procedures or to use approved hand sanitizer with 60-70% alcohol when handwashing is unavailable. I understand that my child will be coached to keep his/her hands away from his/her face, and the faces of others.

5. I will immediately notify the Kinder Works Director if I become aware that my child has been exposed to anyone who has tested positive for Covid.

6. I understand that while present in the facility each day my child will be in contact with children, families and other employees who are also at risk of 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 persons who are asymptomatic and before some people show signs of infection. I understand that I play a crucial role in keeping everyone in the facility safe and reducing the risk of exposure by following the practices outlined herein.

Thank you

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COVID-19 PUBLIC HEALTH EMERGENCY SIGNATURE PAGE

For Parents & Guardians & Designated Others

I, _____ certify that I have read, understand, and agree to comply with the provisions listed herein, *Covid-19 Health Emergency Acknowledgement and Disclosure*, and in the *Covid-19 Policies and Procedures* document. I also certify that I have reviewed these documents with my spouse, and/or with anyone else who picks up or drops off my child/children, and that I am responsible for their compliance.

Child's Name: _____

DOB: _____

Parent's Name: _____

Parent Signature

Date