



EARTH PATH

COVID-19 WAIVER

Child's Name: _____

Parent/Guardian's Name: _____

1. I understand that the Novel Coronavirus causes the disease known as COVID-19. I understand that the Novel Coronavirus may have a long incubation period, during which the carriers of the virus may not show symptoms and be contagious.
2. I understand that sending my child to Earth Path programs to interact with other children and adults may put the child at risk of contracting the Novel Coronavirus. I knowingly consent to have my child attend Earth Path programs during the COVID-19 pandemic and am fully aware of the risks involved in doing so.
3. I understand that an online screening survey must be filled out prior to arrival to the program each week. I understand that this survey will require me to screen my household, including my child, for symptoms of COVID-19 at home prior to arrival. I understand that entry to the program will be denied to any participant who has **not been screened and completed the subsequent online survey**, or if any survey questions were answered with 'yes'. I understand that if someone who is not from my household is doing pick-up or drop-off, they are required to fill out the survey independently - in addition to yours.
4. I understand that if my child starts showing symptoms of COVID-19 during program, they will be sent home and referred for testing. I understand that those who test negative for COVID-19 will be excluded from the program until 24 hours after symptom resolution. I understand that those who test positive for COVID-19 will be excluded from the program for 14 days after the onset of symptoms and clearance has been received from the local public health unit.
5. I have read and understand Earth Path's COVID-19 policies and procedures outlined in the program welcome package and the 'Fall Programs and COVID-19' document attached to the welcome email.

Signature of Parent/Guardian

Date