

COVID-19-Policy

Casa Vera Montessori School
2000 Keele Street, Toronto, ON M6M 3Y4

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COVID-19 POLICY RECEIPT AND WAIVER FORM

The health, safety and well-being of our children and staff is our top priority.

We appreciate and require your cooperation in reopening. Casa Vera Montessori School is commencing reopening based on the assurance that all persons entering centre premises have taken proper precautions to prevent the transmission of COVID-19.

As you are aware, the best understanding of the present evidence is that COVID-19 can be transmitted by persons who do not exhibit symptoms. There is no guarantee that COVID-19 will not be contracted by persons entering our premises.

In spite of all our collective efforts, we could end up with a case of Covid-19 at our facility. Please sign below to indicate that you are aware of the potential for illness, and that you accept the risk associated with sending your child to school during this time.

As a Parent/Guardian, you must monitor your child for signs or symptoms as described in our COVID-19 policy. We request that you screen your child **prior to arrival** at the school each day and fill **the Daily Screening Form**.

In addition to daily active screening, please note that all children will be monitored at school for possible signs or symptoms of illness. If your child experiences symptoms as described in our COVID-19 policy, while at the school, staff will contact you or one of your emergency contacts to pick up your child immediately.

This agreement remains in effect for the duration of child's enrollment in our centre.

As a Parent/Guardian responsible for my child, I have read and understood the **above information** as well as **centre's COVID-19 Policies**.

Hereby, I **acknowledge receipt** of COVID-19 Policy. I have **read and agree to adhere** to all the policies and regulations set forth in centre's COVID-19 Policies.

I **acknowledge and understand** that the services, sanitary practices, screening processes provided by Casa Vera Montessori School Inc. during the Covid-19 Pandemic are as safe as possible for my child(ren).

I am **aware** of the potential **for illness**, and on behalf of my family, I **understand and accept the risk** of illness associated with placing my child in the school.

Therefore, I **waive/release** you from any liability in connection therewith, **indemnify and hold harmless** Casa Vera Montessori School Inc., its **directors**,

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principal and employees from any and all claims, damages and/or liabilities relating to, arising or resulting from **contracting** COVID-19/communicable disease.

Name of child (please print)

Date (DD/MM/YYYY)

Name of Parent/Guardian (please print)

Parent/Guardian signature