



## **COVID-19 ACKNOWLEDGMENT AND LIABILITY WAIVER**

The following is a statement of parent and staff acknowledgment and liability waiver related to COVID-19. An original of this document will be given to you and a copy will remain on file at De Colores.

### **PARENT AND STAFF ACKNOWLEDGMENT AND LIABILITY WAIVER**

I, \_\_\_\_\_, certify that I have received a copy of De Colores Learning Center's COVID-19 Guidelines and Protocols. I understand and agree that it is my responsibility to read and understand the guidelines and protocols and follow the protocols set forth in the guidelines. I acknowledge that if I have any questions, comments, or concerns related to health or the protocols I should to discuss any matters with the De Colores leadership team (director and assistant director).

I agree that although De Colores Learning Center will follow protocols to avoid the spread of COVID-19 and will do everything in its power to offer a healthy learning environment, that COVID-19 is now part of our collective risk as we leave our homes and enter shared environments.

### **LIABILITY WAIVER**

De Colores Learning Center ("De Colores") has put in place preventative measures to reduce the spread of COVID-19; however, De Colores cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending De Colores, as opposed to staying in quarantine at home, may increase your risk and/or your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I and/or my child(ren) may be exposed to or infected by COVID-19 through enrollment, participation or work at De Colores and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the De Colores may result from the actions, omissions, or negligence of, including, but not limited to, De Colores employees, volunteers, and program staff, children and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance or my employment at De Colores.

On my behalf, and/or on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless De Colores, its employees, agents, and representatives, of and from claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any claims based on the actions, omissions, or negligence of De Colores, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation at De Colores.

Date: \_\_\_\_\_

Parent/ Staff Signature: \_\_\_\_\_

Parent/Staff Name (PRINTED): \_\_\_\_\_

Director's signature: \_\_\_\_\_