## BOYERTOWN AREA SCHOOL DISTRICT

**EDUCATION CENTER** 

Lety & Well-Being Acceptance & Respect Communication & Collaboration Learning & Growth

To cultivate an exceptional, innovative learning community that enables all students to succeed in a changing world.

## COVID-19 Student and Parent Acknowledgement

- 1. I am familiar with the Centers for Disease Control and Prevention ("CDC") guidelines regarding the Novel Coronavirus Disease ("COVID-19"). I acknowledge and understand that the circumstances and symptoms regarding COVID-19 are changing from day to day and that, accordingly, the CDC guidelines are regularly modified and updated, and I agree to accept full responsibility for familiarizing myself with the most recent CDC modifications and updates.
- 2. I affirm that neither I, nor any person residing in my household, have been diagnosed with, demonstrated any symptoms of, or have in any way knowingly been exposed to COVID-19, within the past fourteen (14) calendar days. I further affirm that I have not been notified within the past fourteen (14) calendar days that I, nor any person residing in my household, has been exposed to COVID-19.
- 3. I agree that if I, or any person residing in my household, begin to experience symptoms similar to COVID-19, or if I, or any person residing in my household, are notified that I/they have been exposed to or infected with COVID-19 that I will immediately cease participating in the Activity. Furthermore, if I, or any person residing in my household, are notified that I/they have been diagnosed with COVID-19 and I have participated in the Activity within the last fourteen (14) calendar days from the date of diagnosis, that I will immediately notify Boyertown Area School District of the diagnosis.
- 4. I acknowledge that I am aware that by participating in the Activity that there is a risk of being exposed to COVID-19, and/or any mutation or variation thereof. I am also aware that such an exposure can occur either directly or indirectly whether or not a mask and/or gloves are worn and that The Boyertown Area School District cannot guarantee that by participating in the Activity that there will be no exposure to COVID-19. I further acknowledge that while certain individuals are more susceptible to becoming seriously ill if they contract COVID-19 (such as people over 65, people with serious underlying health conditions, and those with compromised immune systems), anyone, including a healthy person, is susceptible to contracting COVID-19. I have independently evaluated and reviewed the risks of being exposed to or infected by COVID-19 and have determined to participate in the Activity with full knowledge and acceptance of the risks.

(Parent/Guardian Signature)	(Date)
(Student Signature)	(Date)
(Student Printed Name)	