

**Parent(s)/Guardian(s) Agreement with Park Forest Preschool
Adopted 08-2021**

We need your help to keep all children and adults at Park Forest Preschool healthy.

Parent/Guardian Name: _____
(Please print clearly)

Student Name: _____ DOB: _____
(Please print clearly)

1. _____ I understand that the Park Forest Preschool COVID-19 Policies and Procedures are posted on the school's website and I have been asked to read them carefully. I do agree to uphold all COVID-19 policies and procedures in the Reopening and Health plan for the Park Forest Preschool including:
2. _____ I will keep my child home, if my child or myself have any of the complaints/possible exposures on the attached screening checklist.
3. _____ I will put a mask on, that covers the nose & mouth, on my child and myself before we get in line, to wait for the morning health screening.
4. _____ I will be responsible for bringing facemasks for my child and myself every morning. , (Park Forest Preschool is able to provide child face masks/marked with child's name and an adult face mask/family).
5. _____ I will lovingly encourage my child to keep the mask on while in line, before & after the health screening.
6. _____ I understand that to minimize the chance of transmission, I am asked to not go into the Park Forest Preschool church building.
7. _____ I will be responsible for the washing of my child's cloth facemasks. I agree to wash their mask after they have used it for one day in school.
8. _____ I will communicate all these required procedures to any other adult who also has permission to drop off or pick up my child.
9. _____ I understand that when attending Park Forest Preschool, each day my child will be in contact with children, and staff 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 persons who are asymptomatic can transmit the virus or before some people show signs of infection. I understand that my family and I play a

crucial role in keeping everyone at Park Forest Preschool safe and reduce the risk of exposure by following the practices outlined in this agreement. I understand that these guidelines can and will be updated and changed related to developments and changes in the Public Health Emergency guidelines on the national, state, and local level, as well as best practices, and CDC guidance and licensing recommendations and/or requirements. Further, I acknowledge that the Park Forest Preschool Director, staff and administrators have the right and responsibility to enact and enforce policies and procedures to keep all employees, children and their families as safe as possible.

I, _____ certify that I have read, understand, and agree to comply with the expectations listed in this agreement. I acknowledge that failure to act in accordance with the expectations listed, or with any other COVID policy or procedure outlined by Park Forest Preschool will result in the termination of preschool services. I acknowledge that my child will not be allowed to attend, if it is determined that my actions, or lack of action unnecessarily exposes another employee, child, or their family member to COVID-19.

Print Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____

Print Parent/Guardian Name: _____

Parent/Guardian Signature: _____ Date: _____