

## COVID INFORMATION AND POLICIES

The health and safety of your children and our staff is of primary importance. Based on current guidance from health experts and governmental agencies, we have implemented a number of strategies to minimize the risk of exposure to COVID-19 in this program.

- Common areas and surfaces will be disinfected at the end of each day.
- Each day at drop-off, children and their guardians will have their temperature taken and answer questions about COVID-19 exposure. If any sign of COVID-19 is present, the child cannot be dropped off.
- Children will have regular bathroom breaks, as well as breaks to wash hands thoroughly throughout the day.
- There will be no common eating area. Children will eat in the classroom at their individual desks. Hands will be washed before and after mealtime. Surfaces will be wiped down.
- Instructors and other youth staff will enforce social distancing guidelines during programming. Desks will be spaced out, children will leave distance between each other when lining up, and children will not share any toys or materials. Each child will have their own set of program materials and toys to play with.
- During drop off and pick up, parents/guardians will drop off and pick up their children one family at a time to make sure that our drop off/pick up locations do not get crowded and we can maintain social distance.
- The facility will maintain a reduced ratio of 1 instructor to 10 children.
- If a child shows any symptoms of COVID-19 (listed below), the child will be immediately separated from the rest of the children in a safe and calm manner until the parent/guardian can come pick them up.
- If a staff member or students is positively diagnosed with COVID-19, the local health authorities will be notified and our facility will close down for a length of time, to be determined by the health authorities. Every parent/guardian will be notified. The facility will also undergo a thorough cleaning and disinfecting while it is closed.

The Centers for Disease Control currently identifies the following symptoms of COVID-19 (however this list may change so please monitor <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html> for the most current information):

- Cough
- Shortness of breath or difficulty breathing
- Fever



- Chills
- Muscle pain
- Sore throat
- New loss of taste or smell

You should monitor the health of your child and not send them to BakerRipley if they are displaying any symptom of COVID-19. If warranted, you should seek COVID-19 testing promptly and report results to BakerRipley staff given the implications for other children, families and staff.



**COVID-19 RELEASE AND WAIVER OF CLAIMS  
("Release")**

The undersigned, in my capacity as parent or legal guardian of \_\_\_\_\_  
\_\_\_\_\_ (child's first and last name), hereby acknowledges the health risks and dangers associated with the transmission of the COVID-19 virus, and other communicable diseases, and recognizes that exposure to the COVID-19 virus, or other communicable diseases, could occur while my child is in the care of BakerRipley. As such, and in consideration for child care services to be provided by BakerRipley,

I, as parent and/or legal guardian, have read and fully understand and acknowledge the contents of the Release and agree that I release, discharge, and hold harmless BakerRipley and its directors, officers, employees, volunteers, and agents (collectively, "BakerRipley") from any and all liability, claims, demands, costs, losses, expenses, damages or other actions (collectively, "Claims") which arise or may arise from participation in and/or in association with the child care services. I assume all risks, including but not limited to exposure or transmission of the COVID-19 virus, associated with or as a result of my child's participation in this program.

I represent that I have full authority to sign on behalf of the child and that my signature binds each other person having authority to make decisions on behalf of the child. Further, my signature below is confirmation that I have read and fully understand and acknowledge the contents of the Release and agree that I am voluntarily waiving, releasing, and discharging BakerRipley from the Claims.

Parent/Guardian Signature: \_\_\_\_\_

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

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