## PARENT RESPONSIBILITY FORM/COVID POLICIES AND PROCEDURES

Talmudical Academy has implemented COVID Policies and Procedures to reduce the potential risk of COVID-19 exposure and spread during school and activities. We will continue to work closely with local officials and adhere to CDC guidelines and/or the Maryland Department of Health recommendations.

Federal and state health agencies recommend various measures to mitigate the risk of contracting COVID-19. Talmudical Academy has communicated the measures that it has taken and will continue to take to mitigate the risks of the virus. Some of these measures include policies for health screening (e.g., temperature and symptom checks), cohorting of classes, social distancing among students and faculty, use of personal protective equipment such as masks and barriers, and cleaning and sanitizing of equipment and facilities.

☐ I understand that Talmudical Academy has implemented protocols that require my child to adhere to certain practices designed to mitigate the risks of contracting the virus. These include (but may not be limited to) measures such as social distancing from other persons, the use of personal protective equipment, health screening. ☐ There are always risks when people congregate. I understand that while present in school, my child will be in contact with children, teachers, and other employees 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 the virus can be transmitted by persons who are asymptomatic and before some people show signs of infection. ☐ I understand there is an inherent risk that my child may become infected with COVID-19 due to his or her attendance at school. The majority of children with COVID-19 will have mild symptoms. I acknowledge and assume the risk of my child becoming infected with COVID-19 at school, becoming either symptomatic or an asymptomatic carrier of the virus and potentially infecting other persons at school, home, or other settings. ☐ I have assessed our family's risk concerning the particular vulnerability of any member or members of our household. If I decide, or I am advised by my physician, that my child should not attend school in person, Talmudical Academy will offer support to continue the education of my children through a combination of distance and independent learning as appropriate for my child's age. ☐ I will monitor my child daily, and not send my child to school if they or anyone in the home exhibits any of the following symptoms: new onset of cough or shortness of breath, temperature of 100.0 F, runny nose, sore throat, achiness/muscle pain,

headache, stomach upset, vomiting, diarrhea, or sudden loss of taste/smell.

I understand that to attend Talmudical Academy on-premises, my child must be free of all symptoms of illness at the start of and continuing throughout the day. If, during the day, staff are concerned about the health of my child, I will be contacted and will endeavor to pick up my child within 45 minutes of being notified.
I will immediately notify the School if I become aware that my child or other family member exhibits any of the symptoms of COVID-19 outlined above or tests positive for COVID-19.
I will not send my child to school if they or a household member has tested positive for COVID-19 in the past 10 days or have been exposed to someone with COVID-19 within the last 14 days.
I understand that the school will inform parents if any student or teacher tests positive for COVID-19. The identity of the student or teacher will not be released, but the information will be provided for other parents to take necessary safety precautions.
If I choose to carpool with another family, all members of the carpool, including the driver and passengers, will wear masks and the windows will be kept open.
I understand that if my child is unable or unwilling to adhere to grade-level expectations established by the School to mitigate spread of infection, I will be contacted by the School to pick up my child.
I will vaccinate my child, unless medically exempt, with the annual influenza vaccine prior to November 1, 2020 in order to reduce the spread of illness in school.
I acknowledge our shared family responsibility to promote and adhere to these protocols to reduce the risks of contracting or spreading the virus at school. I understand that outside of school, to control my child's exposure in the community, I will follow the guidelines and recommendations from the CDC and/or County and City ordinances that limit my child's exposure. These include wearing masks in all public areas, social distancing, and travel advisories.
I understand that Talmudical Academy does not take responsibility for any medical or other expenses or losses if my child or family gets sick during enrolled periods. I understand that I am fully responsible for tuition for my enrolled period, regardless of attendance or quarantine. I understand that I play a crucial role in keeping everyone in the School safe and reducing the risk of exposure by following the practices outlined herein.

By receiving and reading this document, I acknowledge:

I have thoroughly read the COVID Policies and Procedures for returning to in-person learning at Talmudical Academy and hereby acknowledge that this list is not inclusive of all possible risks associated with attending Talmudical Academy.

I understand that failure to comply with any of the policies and procedures set forth by the school may result in the immediate dismissal of my child from Talmudical Academy.

Despite all of these precautions, the risk of contracting and spreading COVID-19 cannot completely be eliminated. I agree that I will not hold Talmudical Academy, ITS EMPLOYEES, FACULTY, ADMINISTRATORS, OFFICERS, BOARD MEMBERS, OR ANY OTHER AGENT OR REPRESENTATIVE OF THE SCHOOL, responsible or LIABLE IN ANY WAY, if my child or any other member of my family contracts COVID-19.

Student Name:		
Grade:		
Parent/Guardian Name:		
Parent/Guardian Signature:		