



Pathways School at DSUMC

Covid-19 School Attendance Waiver

The virus that causes COVID-19 can infect people of all ages. While the risk of serious illness or loss of life is greatest in those 65 years of age and older and/or are immune compromised, persons in every age group can get COVID-19 which may result in a severe illness or death.

We should all be thankful that, with rare exceptions, COVID-19 is not claiming the lives of our children. However, we can never forget that a child with a mild or even asymptomatic case of COVID-19 can spread that infection to others who may be far more vulnerable.

Based upon what information we have COVID-19 is spread from person to person contact that is close enough to share droplets generated by coughing, sneezing, speaking and even just breathing. COVID-19 can also be spread by touching objects where contaminated droplets have landed. Because of this easy manner of transmission, an infant, child, or young person who is infected with COVID-19 can spread the infection to others they come in close contact with, such as members of their household, teachers, or other caregivers. We have learned that infected persons with mild or even no symptoms can spread COVID-19.

These facts are vitally important when considering returning to the Pathways School environment and should be considered by each parent before returning their children to our programs. Dripping Springs United Methodist Church (DSUMC) and Pathways School are taking specific measures, as recommended by the CDC and Texas health authorities, to promote a safe environment. However, it must be clear that each family has to understand the inherent risk of their child participating in any kind of group care. We cannot eliminate all potential risk. We do not expect young children to effectively social distance from other children in their small class. We expect that preschool aged children will, for example, continue to play in proximity to one another, share toys, or touch surfaces that may not be sanitized. Young children also need help from their teacher that requires close contact, for example, putting on clothing items, putting their lunchbox away, or need help with restroom and diapering needs. Young children may also seek, and emotionally benefit from, comfort when sad or anxious. While our staff will generally not initiate hugs, it is expected that children will need hugs at time, thus, there will be some physical contact between teacher and children. To the extent possible, the teachers will remain with the same groups of children. However, there will inevitably be times when, for example, the teacher needs to take a break or is out sick and another teacher will step in from another group to cover them.

All of these factors mean that while Pathways School will take many precautions recommended to combat the spread of COVID-19. These measures may differ from those suitable for other social, business and commercial settings that adults may be more familiar with due to the unique characteristics concerning the Pathways School environment.

Therefore, as a parent or guardian, I agree that I will monitor the health of my/our child(ren) and not send them to Pathways School at DSUMC if my child(ren) are displaying any symptom of or have COVID-19. I agree not to send my child(ren) to the Pathways School if my child (or any of his or her siblings), or

any other member of our household, or any other person with whom we have been in close contact, are showing symptoms of or have COVID-19. I agree to seek COVID testing promptly and promptly report results to Pathways School given the implications for other children, families, and staff. Likewise, I understand that parents or guardians should protect any vulnerable persons who are members of the same household or come into frequent, close contact with children who attend Pathways School.

I understand that participating in the Pathways School at DSUMC program (the "Program") or accessing the facilities could increase the risk of contracting COVID-19. Dripping Springs United Methodist Church can in no way assure, guarantee, or warrant that COVID-19 infection will not occur though participation in these programs or by accessing the facilities.

I understand that I may and should consult my family's health care providers about the risks of COVID-19 and participation in the program and to continue to do so as conditions surrounding COVID-19 change.

By signing below, I acknowledge receipt of the Pathways School COVID-19 Response Plan and, particularly, this COVID-19 School Attendance Waiver (the "Waiver and Release"). I am 18 years of age or older, of sound mind, and understand and agree to the terms of this Waiver and Release. I have been afforded the opportunity to review the contents of this Waiver and Release with an attorney of my choosing if I believed it was necessary to do so, and that participation in the Program is strictly voluntary and I/we are/ am under no legal obligation whatsoever to enroll my/our child(ren) in the Program or to continue to do so.

I understand and acknowledge that participation in the Program may expose me, members of my family, or those with whom I have close contact to COVID-19 and to a risk of COVID-19 infection. I understand that medical research regarding the potential for infection with and harm caused by the COVID-19 is ongoing and incomplete, and that no widely-accepted vaccine against or cure for COVID-19 is currently available.

As a result, I understand that the potential risks associated with exposure to or infection with COVID-19 are not fully known, but may include significant and serious illness, bodily injury, disfigurement, temporary or permanent disability, and/or death. Nevertheless, having considered the risks of participation in the Program, including those outlined in this Waiver and Release, I have determined that I desire for my child(ren) to participate in the Program, of my own free will and out of my voluntary desire for my child(ren) to have the benefit of the Programs. Accordingly, for good and valuable consideration, including without limitation the opportunity to participate in the Program, I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN THE PROGRAM, INCLUDING WITHOUT LIMITATION THE RISK THAT I, MY CHILD(REN), FAMILY OR OTHER PERSONS WITH WHOM I MAY COME IN CLOSE CONTACT, MAY BE EXPOSED TO OR BECOME INFECTED WITH COVID-19. I HEREBY, FOR MYSELF AND MY CHILD(REN) AND MY AND THEIR RESPECTIVE HEIRS, SUCCESSORS, AND ASSIGNS, AND ALL THOSE CLAIMING BY OR THROUGH ME OR MY CHILD(REN), WAIVE, RELEASE, AND AGREE TO DEFEND, INDEMNIFY, AND HOLD HARMLESS DRIPPING SPRINGS UNITED METHODIST CHURCH AND ITS AGENTS, EMPLOYEES, MINISTERS, TEACHERS, TRUSTEES AND VOLUNTEERS (COLLECTIVELY, "INDEMNITEES") FROM AND AGAINST ANY LIABILITY, LOSS, EXPENSE, OR OTHER DAMAGE—INCLUDING PERSONAL INJURIES, PROPERTY DAMAGE, DEATH, COSTS OF COURT, AND ATTORNEY'S FEES—ARISING FROM, RELATING TO, OR IN CONNECTION WITH THE PARTICIPATION OF MY CHILD(REN) IN THE PROGRAMS, **INCLUDING THOSE WHICH ARISE OR ARE ALLEGED TO ARISE FROM THE NEGLIGENCE OF ANY INDEMNITEE SET FORTH ABOVE.**



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I have read, understand, and agree to the above Pathways School COVID-19 Response Plan and the Release and Waiver contained in the Covid-19 School Attendance Waiver.

Parent/Guardian Signature

Today's Date

Parent/Guardian Name

Names and ages of child(ren) attending:

PARENT/GUARDIAN #2 (IF APPLICABLE)

Parent/Guardian Signature

Today's Date

Parent/Guardian Name