COVID-19 - Student Permission Form, Release and Hold Harmless

| In consideration of | (name of student) (hereinafter |
|---|--------------------------------|
| "Student") being allowed to attend St. Helena Catholic School (hereinafter "School"), the undersigned | |
| acknowledges and agrees that: | |

- 1. The risk to have contact with individuals, who have been exposed to and/or have been diagnosed with one or more communicable diseases, included but not limited to Corona Virus Disease 2019 (hereinafter "COVID-19") or other medical conditions, diseases, or maladies does exist, and, despite School's good faith implementation of the New Mexico Department of Education's recommended health, hygiene and social distancing best practices, it is impossible to eliminate the risk that Student might be exposed to and/or become infection through contact with or close proximity with an individual with a communicable disease. Risk from contracting such communicable disease might include illness, permanent disability, or death.
- 2. COVID-19 is a new disease and there is limited information regarding risk factors for severe disease. Based on currently available information and clinical expertise, older adults and people of any age who have serious underlying medical conditions might be at higher risk for severe illness from COVID-19.
- 3. People with COVID-19 have had a wide range of symptoms reported ranging from mild symptoms to severe illness. Symptoms may appear 2 – 14 days after exposure to the virus. People with these symptoms may have COVID-19: cough, shortness of breath or difficulty breathing; fever of 100.4 degrees Fahrenheit or above; chills; muscle pain; sore throat; new loss of taste or smell. This list is not all possible symptoms. Other less common symptoms have been reported, including gastrointestinal symptoms like nausea, vomiting, or diarrhea.
- 4. Student will not attend School and Student's parent or guardian will notify School officials if student currently has symptoms or has been in contact with anyone with a confirmed COVID-19 diagnosis in the last 14 days.
- 5. If Student has been diagnosed with COVID-19, Student will not attend or participate in School until they have received written medical approval from a licensed health care professional, which approval will be provided to School prior to Student's attendance.
- 6. Student will not attend School if they are subject to state or federal government directed quarantine or isolation.
- 7. School retains the right to deny Student's attendance if School determines that such attendance is an undue health risk to Student or others. School similarly has the right to deny any other individual from entering School if said individual's health conditions poses an undue health risk to that individual or others.

| This is to certify that I, as parent/guardian, with legal responsibili his/her release provided above for all the School-related personr students (Releasees) and I do release and agree to indemnify and and all liabilities incident to my minor child's presence or attendates extent provided by law. | nel, Board Members, and/or other d hold harmless the Releasees for any |
|---|---|
| Parent/Legal Guardian Printed Name | |
| Parent/Legal Guardian Signature | - Date |