

COVID-19 Religious Education Health Screening Agreement

Instructions for Parents and/or Guardians,

For the health and safety of our students, the local public health department requires students be screened for symptoms of COVID-19 before entering the Fellowship Hall and Church buildings. Due to the time and interruption to education taking place at this site prior to RELIGIOUS EDUCATION FORMATION entry this would cause, the health department and the CDC do not recommend these screenings be done by the REF program. We ask that you complete the steps of the student screening below, prior to sending your child to religious education formation classes or events. We ask that you complete the form below indicating your understanding and agreement to perform symptom screenings on your child.

By signing this form, I am committing to screening my child before attending religious education for the 2020-2021 year, unless otherwise directed. I also understand that it is my responsibility to call [THE RELIGIOUS EDUCATION OFFICE, 627-8493 ext. 14] as soon as possible to let them know if my child is not going to REF for potential COVID-19 symptoms.

I commit to screening my child \_\_\_\_\_ for COVID-19 symptoms and exposure.

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

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

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