



COVID-19 Waiver and Health Screening Agreement

Laconia Christian Academy is hereby providing notice to me that it intends to run an in-person Summer Adventure Program for the summer of 2021. I/we understand that LCA cannot protect my child/student and/or me from risks, which may be encountered as a result of my child attending the Summer Adventure Program and/or participating in any school-sponsored program. I/we realize there are natural, mechanical, and environmental conditions and hazards which independently or in combination with any activities engaged in while participating in this program may result in the exposure to certain risks including exposure to coronavirus (COVID-19), or other biological agents, virus or similar bacteriological agent, and the risk of being quarantined, or illness that may result in medical care, hospitalization or death.

I hereby agree not to enter the campus of LCA nor permit my child/student to enter the campus of LCA if they have exhibited within the previous 48 hours any of the symptoms currently listed by the Center for Disease Control and Prevention as Symptoms of Coronavirus (see <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>).

Parent Name: _____

Parent Signature: _____

Date: _____, 2021