

**Four Seasons Childcare and Preschool**  
**WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19**

ASSUMPTION OF RISK / WAIVER OF LIABILITY

In consideration of being allowed to participate in the **Four Seasons Childcare and Preschool** program and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases/injury including but not limited to:
  - **Strep**
  - **Scarlet Fever**
  - **Chicken Pox**
  - **Measles**
  - **Norovirus**
  - **Hand Foot and Mouth**
  - **RSV**
  - **Hepatitis**
  - **MRSA**
  - **Influenza**
  - **Pneumonia**
  - **Bronchitis**
  - **E.Coli**
  - **COVID-19.**

While particular rules, policies and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,

2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against injury and infectious diseases. If, however, I observe any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the school's director immediately; and,
4. I, for myself and on behalf of my children, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Four Seasons Childcare and Preschool, the owner, director, employees and other participants, WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, INJURY, loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND SIGN IT FREELY AND VOLUNTARILY.

Name of Child/Children: \_\_\_\_\_

Parent #1 signature: \_\_\_\_\_

Parent #2 signature: \_\_\_\_\_

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

