

COVID-19 POLICY AUTHORIZATION FORM, ASSUMPTION OF RISK & WAIVER OF LIABILITY

Child First Name	e: Child Last Name:
Child DOB:	/ / Parent/Guardian Name:
Parent/Guardiar	n Phone Number: () Email:
	PARENT/GUARDIAN PLEASE INITIAL EACH LINE AND SIGN AT THE BOTTOM.
As the parent/g	uardian for the child listed above, I grant Boys & Girls Clubs of Greater Flint (BGCGF) permission to:
Initial	Check the temperature of my child before entering the Club and as needed
Initial	Deny entry to the Club if my child's temperature is at or above 100.3 ^a
Initial	Deny entry to the Club if my child does not pass the attached questionnaire
	daily
Initial	Remove my child from the program if they are not present 3x/week
Initial	Remove my child from the program if I fail to pick them up on time. I
	acknowledge the program ends at 5 PM. (1 strike rule)
Initial	Remove my child from the program for the day if their behavior becomes a
	hindrance to the safety of the program at the discretion of Club leadership.
Initial	Should my child exhibit any symptoms during the program, I agree to pick up my child from the program
	within 30 minutes of a phone call from Club staff or make other transportation arrangements.

I acknowledge the above policy updates regarding COVID-19 and agree to the terms listed above. I have received a copy of updated policies & procedures and a copy of the Daily Wellness Check on behalf of BGCGF. The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and has significant person-to-person spread. As a result, federal, state, and local governments and federal and state health agencies have recommended social distancing measures and have, in many locations, required ongoing prohibitions on the congregation of groups of people of various sizes.

Boys & Girls Clubs of Greater Flint] ("Club") has put in place preventative measures to reduce the spread of COVID-19. These include, but are not limited to: social distancing, wellness monitoring, increased sterilization, required hand-washing, etc.. However, the Club cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending the Club could increase your risk and your child(ren)'s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending the Club and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Club may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Club employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at the Club or participation in Club programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the Club, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Club, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Club program.

Parent/Guardian Signature:	Date:
Parent/Guardian Printed Name:	
Parent/Guardian Printed Name:	

Any questions can be directed to Tauzzari Robinson, CEO, at trobinson@bgclubflint.org or 810-249-3413.