

COVID-19 Health Screening Agreement – Religious Education

Instructions for Parents and/or Guardians

For the health and safety of our students, the local public health department requires students be screened daily for symptoms of COVID-19 and potential exposure to COVID-19, before entering the classroom areas.

We ask that you complete the student screening on the next page, which includes a temperature check, prior to sending your child to class, or to any Religious Education related. 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 daily for the 2020-2021 class year, unless otherwise directed. I also understand that it is my responsibility to call Sacred Heart Catholic Church (517-448-3811) as soon as possible to let us know if my child is not going to class due to potential COVID-19 symptoms.

I commit to screening my child _____ daily for COVID-19 symptoms and exposure.

Parent(s)/ Guardian(s) Name: _____

Address: _____

Phone Number: _____

Parent or Guardian Signature: _____

Date: _____

Sacred Heart Catholic Church is committed to providing a safe environment for all students and staff. This includes assuring that each student is screened daily prior to entering the classroom areas. The parish also commits to social distancing, mask wearing, regular disinfection, promotion of personal hygiene, and other activities recommended by the health department.