



2020-2021 Parent Declaration

Please list your children who are enrolled at Coralwood this school year and their grade.

Child (1) Name: _____ Grade: _____

Child (2) Name: _____ Grade: _____

Child (3) Name: _____ Grade: _____

Child (4) Name: _____ Grade: _____

Please read each statement and write your initials in the box beside each one.

1. I have read the COVID-19 Handbook.

2. I have received the COVID-19 Self-Screening Questionnaire.

3. I will use the COVID-19 Self-Screening tool daily to screen the above named before sending them to school.

4. If my child falls ill during the school day, I will pick up my sick child and all of my other children attending Coralwood within an hour of receiving notice from the school.

5. In the event I cannot pick up my child within the hour, I have arranged for
Name: _____ Phone number: _____
to fulfill my responsibility to pick up my child(ren) within the hour.

I understand my responsibility, as indicated above and within the Coralwood Adventist Academy COVID-19 Handbook, and will do my part to keep my child(ren), my family, and my school community safe by cooperating with the school in the specifics stated within the handbook and on this declaration. All the information above is accurate. I will inform the school if my emergency pick up arrangement changes.

Print name: _____

Signature: _____ Date: _____

*****THIS DECLARATION MUST BE COMPLETED, SIGNED, AND RETURNED TO THE OFFICE TO ALLOW YOUR CHILD INITIAL ENTRY INTO THE BUILDING.*****