



**AGREEMENT TO ADHERE TO COVID-
19 PROTOCOLS AND ACKNOWLEDGEMENT OF
PARENTAL RESPONSIBILITY**

In response to the novel coronavirus pandemic ("COVID-19"), Trinity High School closed beginning in March of 2020 to limit the spread of COVID-19. Our State and local public health departments have now indicated it is safe to resume in-person instruction for the 2020-2021 school year provided measures are in place to limit the spread of COVID-19. To this end, for the 2020-2021 school year, Trinity has developed and implemented its plan to limit or reduce the spread of COVID-19 by attending school and school activities in accordance with the guidance issued by our State and local departments of public health.

However, it is imperative that you understand that even with this plan in place, Trinity cannot guarantee that your student will not contract COVID-19 as there are no known measures at this time to completely eliminate the possibility of infection. As a result, attending school and/or participating in any school activities exposes your child and/or your child(ren) to risk of contracting COVID-19. Trinity has developed an online learning option for students who do not wish to take any such risk.

**PARENT/STUDENT AGREEMENT TO ADHERE TO COVID-
19 PROTOCOLS**

I/we acknowledge and agree that:

1. I am aware of and have been offered the school's online learning option;
2. I will read and agree to follow the school's COVID-19 procedures and will review them with my child(ren);
3. I will notify the Dean if my/our child(ren) or anyone living in my home has contracted COVID-19 and I will self-quarantine my child(ren) if I determine she has been exposed to COVID-19;
4. Each day before school, I will make certain my child is not ill and not displaying any COVID-19 symptoms. I will check her temperature to ensure she does not have a fever of 100.4 or higher, I will complete the Symptom App daily and I will not send my child(ren) to school or to any school activity if she/they are not feeling well, display any COVID-19 symptoms, or have a fever of 100.4 or higher;
5. I will notify the Dean if my child(ren) has/have any medical condition that make her/them more vulnerable to contracting COVID-19 and will work with the treating medical provider to determine what accommodations, if any, to the school's COVID-19 procedures may be provided to reduce the threat of harm to my child(ren);
6. School staff have the discretion to determine whether a student is ill by asking her how she is feeling and taking her body temperature, or potentially contagious, and whether it is in the best interests of the student, other students and school staff, to mandate that my child(ren) be picked up from school at the time of that determination and that I will immediately pick my child(ren) up from school upon receiving such notice;
7. If I keep my child(ren) home because she/they are not feeling well, display symptoms of COVID-19, has been exposed to someone with COVID-19 or if my child is sent home because she is displaying COVID-19 symptoms, she may return to school and school activities in accordance with the prevailing guidance of our State and local health department as communicated by the School.
8. I/we will notify the school Dean if my/our child(ren) or anyone in our household travels to or has traveled to a state or country experiencing widespread or ongoing community spread of COVID-19 and will self-quarantine as recommended by the local authorities.

ACKNOWLEDGEMENT OF AND ASSUMPTION OF RISK

I acknowledge that sending my child(ren) to school for in-person instruction and/or to participate in school activities involves certain risks due to the COVID-19 pandemic and may pose a threat to the safety of my child(ren). I expressly acknowledge the due to the contagious nature of COVID-19, my child(ren) may be exposed to and/or contract COVID-19 by attending school, and/or participating in school activities, and that, if infected, the risks include personal injury, illness, permanent disability, and death. Despite the school's implementation of and adherence to its COVID-19 procedures there are no known processes to eliminate all risk of spread or infection. I hereby assume all risk of my child(ren) attending school, and/or by participating in school activities, and take responsibility for all such risk and any injury or damage that I and/or my minor child(ren) may suffer as a result of attending school and/or participating in school activities. I acknowledge that, despite the aforementioned risks, I will review the school's COVID-19 protocols with my child(ren) and adhere to all school COVID-19 protocols stated herein and that may change from time to time.

WAIVER OF LIABILITY

To the fullest extent permitted by law, I further agree on behalf of myself, my family, and my child(ren) and our heirs, executors, agents, successors, and assigns, and do hereby waive, relinquish, release, defend, indemnify, hold harmless and covenant not to sue Trinity High School, the Catholic Bishop of Chicago, and their respective directors, officers, staff, administrators, employees, volunteers, agents, representatives, insurers, attorneys, successors and assigns ("Indemnitees") from and against any and all claims, charges, demands, suits, and causes of action, whether known or unknown, past, present or future, including, but not limited to, any and all costs, expenses, and attorneys' fees, by reason of any injury, illness or death, damage or loss to person or property, video or audio recordings or photographs or online rebroadcasts, or any other harm to myself or to any person or property, whether caused by negligence or for any other reason arising out of, in connection with, or in any manner related to attendance at school or participation in school activities, including but not limited to any claims of negligent exposure.

ACKNOWLEDGEMENT OF E-LEARNING RECORDING

Trinity classes may be recorded, in whole or in part, for Trinity's online learning option or in connection with school-wide online learning if mandated by conditions or governing authorities. Because such classes may be recorded, students may be recorded participating in the class (visually or orally or both) or incidentally. I expressly acknowledge that sending my child(ren) to school for in-person instruction and/or to participate in school activities and/or attending online learning may result in the child being recorded during in-school activities including classes, involves certain risks due to the COVID-19 pandemic may pose a threat to the safety of my child(ren). I hereby waive any claims related to, and expressly agree and give my permission that, my child(ren) may be recorded or photographed in connection with their school activities including class, and that such recordings may be re-broadcast as part of or in connection with Trinity's online learning for other students.

BY MY SIGNATURE BELOW, I HAVE READ THIS DOCUMENT, FULLY UNDERSTAND ITS CONTENTS AND FREELY AND VOLUNTARILY AGREE TO ADHERE TO THE COVID-19 PROTOCOLS, ACKNOWLEDGE AND ASSUME THE RISKS, AND ACCEPT THE WAIVER OF LIABILITY.

Parent/Legal Guardian Printed Names: _____

Parent/Legal Guardian Signatures: _____

Date: _____