

LIMITED WAIVER OF LIABILITY RELATED TO COVID-19 AND HEALTH SCREENING AGREEMENT 2020-2021

The Christian School at Castle Hills (CHS) is hereby providing notice to me that it intends to reopen its school program on Wednesday, August 19, 2020. I/we understand that CHS will take reasonable measures to protect students, faculty, and on-campus personnel from the coronavirus (COVID-19), however, such measures may not always be successful and CHS cannot guarantee protection for my child/student and/or me from risks, which may be encountered as a result of my child attending The Christian School at Castle Hills and/or participating in any school-sponsored program. I/we realize there are natural, mechanical, and environmental conditions and hazards which independently or in combination with any activities engaged in while participating in this program may result in the exposure to certain risks including exposure to coronavirus (COVID-19), or other biological agents, virus or similar bacteriological agent, and the risk of being quarantined, or illness that may result in medical care, hospitalization, or death.

 I hereby agree not to enter the campus of CHS nor permit my child/student to enter the campus of CHS if they have exhibited within the previous 48 hours any of the symptoms currently listed by the Center for Disease Control and Prevention as Symptoms of Coronavirus (see <u>CDC COVID Symptoms</u>).

I/We hereby state that I/We, on behalf of my child/student and myself, am an adult, over the age of 18, and legally competent to sign this form. I/We understand these inherent risks and dangers involved with participation in the CHS education program providing its educational program and acknowledge the existence of risks due to the coronovirus (COVID-19) which are not obvious or predictable, and hereby intend this limited release to extend to injury or loss which results from both obvious or predictable risks, as well as risks that are unpredictable and not obvious and to extend to myself and my child/student, as applicable.

In consideration of myself and my/our child/student participating in The Christian School at Castle Hills school program, I/we, and any legal representatives, heirs and assigns, hereby release, waive, and discharge The Christian School at Castle Hills, its officers, directors, employees, agents, and representatives from any and all liability for any and all loss or damage, and any claim for damages resulting therefrom, on account of any injury, illness or exposure to and/or contracting the coronavirus (COVID-19) or other biological agents, virus or similar bacteriological agent by me or my/our child/student attendance at and participation in The Christian School at Castle Hills educational program, preschool and/or afterschool program, including any medical expenses, injury and/or death.

I/We agree to indemnify The Christian School at Castle Hills, its officers, directors, employees, agents, and representatives from any loss, liability, damage, or cost that may be incurred due to my child/student participation in the aforementioned program related to the coronovirus (COVID-19), whether caused by the negligence of CHS or otherwise. I fully understand, on my own behalf, and behalf of my child/student the risks associated with the aforementioned participation and assume any risk associated concerning the contraction, spread, or other unknown risks related to the coronovirus (COVID-19).

This notice, limited release and indemnity agreement contains the entire agreement between and among the parties hereto, and the terms of this release are contractual and not a mere recital.

The parties to this agreement hereby agree that the interpretation and enforceability of this Release shall be governed by the laws of the State of Texas.

I/We expressly agree that this limited release, waiver, and indemnity agreement is intended to be as broad and inclusive as permitted by applicable laws and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I/We understand that by signing this agreement, I/We am giving up on behalf of my child/student and myself certain legal rights and remedies including the right for my child/student and/or myself to recover damages in the event of death, personal and/or bodily injury as related to the coronovirus (COVID-19), property loss or damage, expenses of any nature whatsoever including attorney's fees, and other losses that my student(s) or that I may sustain as a result of the coronovirus (COVID-19), in association with my child's participation in the CHS educational program.

I/WE HAVE CAREFULLY READ THE FOREGOING LIMITED RELEASE AND KNOW AND UNDERSTAND THE CONTENTS THEREOF. I/WE SIGN THIS LIMITED RELEASE VOLUNTARILY AS MY OWN FREE ACT WITH FULL KNOWLEDGE OF ITS SIGNIFICANCE, INTENDING TO BE LEGALLY BOUND THEREBY.

Father (signature)	Date
(Print name)	
Mother(signature)	Date
(Print name)	