

Daily Parental Screening Agreement 2020/2021

Parent's Role in Keeping Children & Youth Events Safe at Church

Everyone has a role to play in keeping families safe and reduce the spread of COVID-19. It is the responsibility of parents and caregivers to assess their children **on a daily basis before sending them to any Cornerstone programming**. Additionally, parents must have a person available to pick up their child right away, should they become sick during the event. Please read the following guidelines, then sign the agreement below.

Guidelines for determining whether a child should remain at home:

Parents and caregivers must assess their child daily for the following symptoms:

- Fever/chills (*feeling hot to the touch, a temperature of 37.8 degrees Celsius/100.4 degrees Fahrenheit or higher*)
- Cough that's new or worsening (*continuous, more than usual*)
- Shortness of breath (*out of breath even when sitting or walking*)
- Sore throat (*not related to seasonal allergies or other known causes or conditions*)
- Runny, stuffy or congested nose (*not related to seasonal allergies or other known causes or conditions*)
- Unusual level of fatigue
- Headache that's unusual or long lasting
- Nausea/vomiting, diarrhea, loss of appetite, stomach pain (*not related to other known causes or conditions*)
- Feeling unwell for an unknown reason

If children display symptoms, they must remain home from Church events and seek medical attention by a health care provider to see if testing is recommended. Please see the Ontario COVID Screening Tool for further guidance: covid-19.ontario.ca/self-assessment/. Parents can also contact Niagara Region Public Health for general COVID-19 questions at 1-888-505-6074; 905-688-8248, press 7, then press 2.

All children that have travelled outside Canada in the last 14 days, OR were identified by Public Health as a close contact of someone who tested positive for COVID-19 must stay home and self-isolate.

Parental Agreement

Thank you for your cooperation as we work together to keep everyone safe. Please indicate that you have read and understood the above guidelines by completing the form below.

Please initial the statements below:

I have read the above guidelines and agree to assess my child(ren) daily and not send them to Church events if they are displaying any symptoms listed above.

I will ensure that myself or an authorized person is available to pick up my child(ren) immediately should they become symptomatic while at Church events.

Child's Name _____ Grade _____

Child's Name _____ Grade _____

Signature of Parent /Guardian _____

Printed Name of Parent/Guardian _____ Date _____