

# 1696910 ONTARIO LIMITED – ACTING AS INTERPLAY

## STUDENT WAIVER – SUMMER CAMP AUGUST 2020

At 1696910 Ontario Limited/Interplay, we place importance on the safety of all students during these unprecedented times.

We ask that you sign this form to confirm that the school has sent an email stipulating the importance of maintaining the safety of all staff and students while in the schools. We know that there are risks associated in these lessons with contracting COVID-19.

In accordance to the COVID-19 pandemic – Stage 3, the Health Officials, have permitted dance lessons in-studio.

I understand the novel coronavirus causes the disease known as COVID-19 and that is currently of the virus may not show symptoms and still be contagious.

I understand the federal and provincial governments have asked individuals to maintain social distance while in studio and outside.

I hereby state that I have read and I fully understand the consent forms and I have been given an opportunity to ask any questions directly to Karen Davies Thomas, Director/Owner by email to kdthomas@rogers.com. These questions have been answered to my satisfaction and therefore authorize my child/ren to attend lessons in-studio. I have read all safety protocol before, during and after these lessons.

Name of Student \_\_\_\_\_

Name of Parent \_\_\_\_\_

Signature of Parent \_\_\_\_\_

Date \_\_\_\_\_

## DANCE STUDENT SCREENING FORM (COVID-19)

\*Please circle answer

1/ Has your child had close contact with anyone with acute respiratory illness

Yes                  No

2/ Has your child or your family members travelled outside of Ontario in the past 14 days?

Yes                  No

If yes, who? \_\_\_\_\_

3/ Does your child have a confirmed case of COVID-19 or had close contact with a confirmed case of COVID-19?

Yes                  No

4/ Does your child have any of the following symptoms. Please answer – Yes/No

- Fever \_\_\_\_\_
- New Onset of Cough \_\_\_\_\_
- Worsening chronic cough \_\_\_\_\_
- Shortness of Breathing \_\_\_\_\_
- Difficulty Breathing \_\_\_\_\_
- Sore throat \_\_\_\_\_
- Difficulty Swallowing \_\_\_\_\_
- Decrease or loss of senses of taste or smell \_\_\_\_\_
- Chills \_\_\_\_\_
- Headaches \_\_\_\_\_
- Unexplained fatigue/malaise/muscle aches \_\_\_\_\_
- Nausea/vomiting, diarrhea, abdominal pains \_\_\_\_\_
- Pink eye \_\_\_\_\_
- Runny nose/nasal congestion without other known cause \_\_\_\_\_

5/ Interplay is not responsible if the student becomes ill. The student is attending at their own risk.

6/ If the student does not respect the new social distancing protocol implemented, the teacher has the right to ask them to leave, and no refund will be given for that class. This is for the safety of all students and staff members.

7/ As things progress, it is at the director's discretion to change the rules. A new form will be sent out and must be signed before the return of the student into the studio.

Dancer Name \_\_\_\_\_ How many people in social bubble? \_\_\_\_\_

Parent Name \_\_\_\_\_ Signature \_\_\_\_\_

Date \_\_\_\_\_