

Pledge between Parents and Creative Beginnings Christian Preschool (CBCP)

For School Year _____

As a parent or caregiver of a child/children of CBCP:

I understand it is not possible to care for toddlers and preschoolers from a distance and that the preschool cannot prevent all illnesses. I have read and agree to all the **General Preparedness and Planning** CBCP has implemented to reduce the risk of infection and illness.

I pledge to follow the **General Preparedness and Planning for Families** guidelines to do my part to reduce and prevent the risk of infection and illness.

I pledge to do health checks on my child/ren **before** bringing them to preschool. I agree that CBCP has the right to exempt my child/ren from preschool if he/she is displaying any symptoms of infection or illness at the time of drop-off or during the school day.

I understand that if my child/ren displays any symptoms of infection or illness during the day after arrival, my child/ren and other siblings attending CBCP will need to be picked up immediately.

I pledge to communicate with the preschool if my child/ren has an infectious illness that could possibly result in the spread of infection and illness at the preschool.

I pledge to keep my child/ren home if they are displaying any of these symptoms until the symptoms are gone for 24 hrs without administering "symptom-reducing" medications or until a doctor clears them to return to class.

I pledge to follow the CDC guidelines if my child or a family member has a known or suspected case of Covid-19 and that my child/ren will be exempt from the program until:

- ***At least 72 hours of no fever, without using fever-reducing medications.***
- ***AND at least 10 days after symptoms started,***
- ***AND symptoms improving –note: consult the Henderson County Health Department for local requirements <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-childcare.html>***

I understand decisions about closures due to infectious illnesses at CBCP may be dependent on status of outbreak in community, number of infected persons within the program, staffing availability, and NC governor orders that mandate the entire state. I understand the financial policies of the preschool and that monthly tuition will not be refunded in the case of these events.

I pledge to share this information with other caretakers in our family that will be involved in our child's education at CBCP.

Signature

Date

