



**St. James Lutheran Church
Gettysburg, PA**

PO Box 4596, 109 York St.
Gettysburg, PA 17325-4596
Telephone: (717) 334-2012

**CHILD CARE RELEASE AND
INDEMNITY AGREEMENT**

1st CHILD:	
Name:	Date of Birth:
2nd CHILD:	
Name:	Date of Birth:
3rd CHILD:	
Name:	Date of Birth:

FIRST PARENT/GUARDIAN INFORMATION:			
Name:		Email:	
Address:		City:	State: Zip:
Home Phone: <input type="checkbox"/> Primary	Cell Phone: <input type="checkbox"/> Primary	Work Phone: <input type="checkbox"/> Primary	
SECOND PARENT/GUARDIAN INFORMATION:			
Name:		Email:	
Address:		City:	State: Zip:
Home Phone: <input type="checkbox"/> Primary	Cell Phone: <input type="checkbox"/> Primary	Work Phone: <input type="checkbox"/> Primary	

RELEASE AND INDEMNITY AGREEMENT	
<p>In consideration for allowing the child(ren) listed above to participate in childcare programs at the St. James Lutheran Church Early Learning Center ("the St. James ELC"), I hereby acknowledge and agree as follows:</p> <p>1. Novel coronavirus ("COVID-19") infections have been confirmed throughout the United States, including several cases in Gettysburg, PA and surrounding areas.</p>	

2. The St. James ELC has implemented policies and procedures intended to minimize and slow the transmission and spread of COVID-19 in accordance with guidance provided by Public Health Agencies including, without limitation, the World Health Organization, the Centers for Disease Control and Prevention and the Pennsylvania Department of Health, which may be updated and/or revised at any time and without prior notice based on revised guidance provided by any Public Health Organization or other appropriate government or non-government agency or organization.

3. I have received a copy of the St. James ELC COVID-19 Policies and Procedures and have read and understand them. In particular, I understand that:

a. My child(ren) and I may not visit or utilize St. James ELC facilities or participate in in-person St. James ELC activities if I, my child(ren) or any other member of my household (i) experiences symptoms of COVID-19, including, without limitation, fever, cough or shortness of breath, or (ii) has a suspected or diagnosed/confirmed case of COVID-19; and

b. I must notify the St. James ELC immediately if I believe that any of the foregoing access/use restrictions may apply.

4. Despite the appropriate precautions being taken by the St. James ELC to minimize and slow the transmission of COVID-19, I understand that my child(ren)'s participation in childcare programs with the St. James ELC may significantly increase the likelihood that my child(ren) contract(s) COVID-19 and transmits it to me, other members of my household and others with whom my child(ren) or members of my household come into contact.

5. I understand that many people who contract COVID-19 are asymptomatic but may nevertheless transmit COVID-19 to others.

6. I further understand that COVID-19 can cause serious illness, permanent injury or death in people of all ages, regardless of pre-existing condition.

7. Notwithstanding the known and unknown risks of my child(ren)'s participation in childcare services with St. James ELC, I request that my/our child be enrolled and be permitted to participate in childcare services with the St. James ELC.

8. I FULLY ACCEPT AND ASSUME ALL RISKS AND ALL CONSEQUENCES of my child(ren)'s participation in childcare activities with the St. James ELC.

9. For myself, my named child(ren) and for our personal representatives, administrators, heirs and assigns, I HEREBY RELEASE, DISCHARGE, INDEMNIFY, SAVE AND HOLD HARMLESS ALL "RELEASEES," including (a) The St. James ELC; (b) St. James Lutheran Church of Gettysburg, Pennsylvania; (c) their officers, directors, administrators, agents, employees or volunteers; and (d) all other St. James ELC childcare participants, including their parents/guardians, FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES whatsoever caused, in whole or in part, by the actions or inactions of the Releasees or otherwise, and I will indemnify, save and hold harmless any such Releasee from any ATTORNEY'S FEES, COSTS AND OTHER EXPENSES in any way related to any such demands or claims which are made despite the existence of this Agreement.

I HAVE READ THIS AGREEMENT AND FULLY UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT. I AM SIGNING IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND I INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY AND WAIVER OF ALL POSSIBLE CLAIMS TO THE GREATEST EXTENT ALLOWED BY LAW. I AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID OR UNENFORCEABLE AGAINST ME, THE REST OF THE AGREEMENT, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

SIGNATURES:

_____ First Parent/Guardian	Date:_____
_____ Second Parent/Guardian	Date:_____