

# BLESSED SACRAMENT CATHOLIC SCHOOL WELLNESS PLEDGE



As a parent/student, I pledge to partner with the school to protect the health and safety of our Blessed Sacrament children, staff, and families. I understand that actively taking steps to reduce the risk of COVID-19 is a shared responsibility of every staff member, parent, visitor, and student.

While committing to follow all safety measures and expectations, I realize Blessed Sacrament does not guarantee a COVID-19 free environment.

*Please initial each statement and sign/date the bottom of this pledge.*

## **I will commit to the following guidelines to protect the safety of our children:**

\_\_\_\_\_ I will commit to checking my child's temperature each morning prior to sending them to school.

\_\_\_\_\_ I will commit to keeping my child home should they demonstrate any of the following symptoms:

- Fever of 100.4° F or higher
- Cough
- Shortness of breath or difficulty breathing
- Sore throat

\_\_\_\_\_ I will commit to keeping my child home for 10-14 days should they come in direct contact with a COVID-19 positive person, if any member of the household tests positive for COVID-19, or my child tests positive for COVID-19.

\_\_\_\_\_ I will commit to supporting distancing procedures:

1. Practice at home with my child to adjust to wearing a mask before we begin school.
2. Require my child wear their mask in/out of school, and encourage them to wear their mask during the day when social distancing is not possible outside of school.

\_\_\_\_\_ I will commit to practicing with my child proper personal hygiene habits such as handwashing, sneezing, coughing, and distancing.

\_\_\_\_\_ I will commit to support not coming in the building at non-essential times (and calling in from the parking lot to get clearance should entering the building be necessary).

\_\_\_\_\_ I will commit to reading all communication, watching all video links, and supporting my child's technology needs as necessary.

\_\_\_\_\_ I understand not following the above criteria places all families at risk and may impact my child's enrollment at Blessed Sacrament School.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date