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Assumption of Risk

The novel coronavirus (“COVID-19”) has been declared a worldwide pandemic by the World Health Organization, and in response to the significant risk presented by this virus, Massachusetts’s Governor has declared a state of emergency, and previously closed all school campuses except for residential education programs for children with special needs. Following medical guidance and four key data points regarding the virus, Massachusetts has started its reopening process across the state which includes the reopening of educational programming for limited in-person summer services on day school campuses.

Milestones Day School intends to reopen on Monday, 7/20/20 with limited in-person instruction as prescribed by state and medical guidance. This date may be subject to change based on the fluid nature of this virus and the required process for reopening to safely provide in-person instruction. It is our intent to be adequately prepared to safely and effectively provide your child with educational services through limited in-person instruction. We are following state guidance to ensure our efforts match those that are prescribed as necessary to reopen in a safe manner.

Please read the following information and sign as to your agreement and acknowledgment.

COVID-19 is extremely contagious and believed to be spread from person-to-person contact and/or by contact with contaminated surfaces and objects, and even possibly in the air. To prevent the spread, federal, state and local governments, as well as federal and state health agencies, recommend social distancing.

Milestones Day School has put in place preventative measures, new procedures, protocols and policies, undergone trainings, and purchased necessary protective safety equipment to reduce the spread of COVID-19. Milestones Day School cannot guarantee that your child will not be exposed to, contract or spread COVID-19. Further, attending school for in-person instruction increases your child’s risk of contracting COVID-19.

By signing this agreement, you acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that your child may be exposed to or infected by COVID-19 by attending school, and that such exposure or infection may result in personal injury, illness, permanent disability and possibly even death. You understand that this risk may result from the actions, omissions or negligence by your child, any employee and/or other students at the school.

By signing this agreement, I _____ (parent/guardian name) acknowledge that I have carefully read and fully understand all provisions of this Assumption of Risk, and freely and knowingly assume the risk as

described above:

I, _____ (parent/guardian) am the parent/guardian of
_____ (student name), who attends Milestones Day School. I have the
legal right to consent to and, by signing below, I do consent to the terms and
conditions of this Assumption of Risk.

Parent/Guardian Name: _____ Date: _____

Parent/Guardian Signature: _____