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Due to the 2019-2020 outbreak of the novel Coronavirus (COVID-19), High Achievers Education Center Inc. is taking extra precautions with the care of every client to include health history review and enhanced sanitation/disinfecting procedures in compliance with CDC guidance.

Symptoms of COVID-19 include:

- Fever
- Fatigue
- Dry Cough
- Difficulty Breathing

I agree to the following:

- I understand the above symptoms and affirm that I, as well as all household members, do not currently have, nor have experienced the symptoms listed above within the last 14 days.
- I affirm that I, as well as all household members, have not been diagnosed with COVID-19 within the past 30 days.
- I affirm that I, as well as all household members, have not knowingly been exposed to anyone diagnosed with COVID-19 within the past 30 days.
- I affirm that I, as well as all household members, have not traveled outside of the country or to any city considered to be a "hot spot" for COVID-19 infections within the past 30-days.
- I understand that High Achievers Education Center Inc. cannot be held liable for any exposure to the COVID-19 virus caused by misinformation on this form or the health history provided by each client. High Achievers Education Center Inc. is following theses enhanced procedures to prevent the spread of COVID-19:

By signing below, I agree to each statement above and release High Achievers Education Center Inc. from any and all liability for unintentional exposure or harm due to COVID-19.

This COVID-19 Assumption of Risk, Release, and Waiver of Liability Agreement ("Agreement") shall be binding on my heirs, executors, administrators, successors, and assigns. I expressly agree that this Agreement is intended to be as broad and inclusive as is permitted by applicable laws, and that if any portion of this Agreement is found to be void or unenforceable, the remaining portions shall remain in full force and effect. This Agreement contains the entire understanding of the parties relating to the subject matter, and shall not be altered, modified, amended, waived or supplemented in any manner whatsoever except by a written agreement signed by both parties hereto or their duly authorized representatives. This Agreement may be executed, made and delivered electronically.

Parent's Signature Date		Student's Name	
Parent's Name (PRINTED)_		Date	

Signature:	Signature:

Email: Email: