

September 4, 2020

Dear Guardian,

The purpose of this letter is to provide information and changes necessary for the 2020-21 school year. Due to the current health pandemic, P.A.R.K. will be making some shifts in how we service our families while still honoring our mission to provide a positive atmosphere that is structured around academic intervention, discipline, ministry, and mentoring. Please be aware that P.A.R.K. may modify and/or change methods of programming implementation as further developments unfold around the Covid-19 pandemic.

P.A.R.K. will follow the guidelines provided by the CDC, Arkansas Department of Health (ADH), Little Rock and Pulaski County Special school districts, as well as local, state and federal government in the operation of our program. The use of personal protective equipment, physical distancing, and in-depth cleaning and sanitizing procedures will be continually practiced.

While we will be holding a mandatory guardian orientation to cover more detailed information regarding the school year next Thursday, September 10th, 2020 at 6:30 pm via Zoom, please see below for a general overview of our revised daily procedures:

- Students MUST have both P.A.R.K.'s signed Covid-19 Liability Release Waiver and Transportation Authorization forms on file before they can attend for the 2020-21 school year. These are included below.
- P.A.R.K. will hold on-site and virtual services until further notice.
 - Students attending school in-person will be allowed to attend P.A.R.K. weekly.
 - Students attending school virtually will ONLY be allowed virtual access for the current time period.
- P.A.R.K. will be **open Monday Thursday** (not Friday) to accommodate our PCSSD blended students.
- P.A.R.K. will **close at 6:00 pm** daily to allow time for staff to disinfect the building.
- Guardians will NOT be allowed to enter the building at this time for safety purposes. Staff will monitor students' dismissal to their rides. Further details on check out will be given during the mandatory guardian orientation.
- All students and staff will complete daily temperature & health checks upon entry into the building
- All students and staff will be required to wear a mask, secured over their nose & mouth, the entire time they are in the building.
- Our program is scheduled to begin Monday, September 14th, 2020!

We are beyond excited to see our students, in-person or virtually, and begin our school year program! More details will be available during the mandatory guardian orientation and in writing. We will work to inform you asap of any changes as they develop. We encourage you to scan the QR code below to download the P.A.R.K. app as that will be our primary method of communication. Feel free to contact us with any questions, concerns or comments. We will email and text our Zoom meeting information early next week.

Thank you for entrusting us with your most precious possession,

Tamra Patterson Calamese Program Director





COVID-19 Liability Release Waiver (p. 1)

The World Health Organization has declared the novel Coronavirus (COVID-19) a worldwide pandemic. Due to its capacity to transmit from person-to-person through respiratory droplets, the government has set recommendations, guidelines, and some prohibitions which Positive Atmosphere Reaches Kids ("P.A.R.K.") adheres to comply.

In consideration of my participation in the foregoing, the undersigned acknowledge and agree to the following:

I am aware of the existence of the risk on my child's physical appearance to the venue and my participation to the activity of P.A.R.K. that may cause injury or illness such as, but not limited to Influenza, MRSA, or COVID-19 that may lead to paralysis or death.	
My child has not experienced symptoms that of fever, fatigue, difficulty in breathing, or dry cough or exhibiting any other symptoms relating to COVID-19 or any communicable disease within the last 14 days.	
My child has not, nor any member(s) of my household, traveled by sea or by air, internationally within the past 30 days.	
My child did not, nor any member of my household, visit any area within the United States that was reported to be highly affected by COVID-19, in the last 30 days.	
My child has not been, nor any member(s) of my household, diagnosed to be infected of COVID-19 virus within the last 30 days.	
I understand I am REQUIRED to notify P.A.R.K. immediately if any of the above listed statements change in order to remain in good standing with the program.	
Following the pronouncements above I hereby declare the following:	
I am aware that I will be fully and personally responsible for my child's own safety and actions during participation in the program. I recognize that by participating my child may be at risk of being exposed to COVID-19.	
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With full knowledge of the risks involved, I hereby release, waive, discharge P.A.R.K., its board, officers, independent contractors, affiliates, employees, representatives, successors, and assigns from any and all liabilities, claims, demands, actions, and causes of action whatsoever, directly or indirectly arising out of or related to any loss, damage, injury, or death, that may be sustained related to COVID-19 while participating in any activity while in, on, or around the premises or while using the facilities that may lead to unintentional exposure or harm due to COVID-19.	,



COVID-19 Liability Release Waiver (p. 2)

By signing below I acknowledge that I have read the foregoing Liability Release Waiver and understand its contents; that I the legal guardian of the child listed on this form and fully competent to give my consent; I have been sufficiently informed of the risks involved and give my voluntary consent in signing it as my own free act and deed; that I give my voluntary consent in signing this Liability Release Waiver as my own free act and deed with full intention to be bound by the same, and free from any inducement or representation.

This waiver will remain effective until laws and mandates relevant to COVID-19 are lifted.

Student's Printed Name

Phone Number	Date	
Guardian's Signature		
First Name	Last Name	
Guardian's Printed Name		
First Name	Last Name	



Transportation Authorization Form

This information will be kept on file as a reference for any staff member involved in receiving or dismissing your child. Please inform us promptly of any changes in writing. Students will only be released to those persons authorized by the guardian.

Student's Name:

Guardian's Name(s):		
List anyone other than the about transport your child to/from t	• ,	ho is authorized to
*NOTE: Rides are requing noted in the student's file.		lder unless specially
** Please inform those l when picking up your st		ntification available
NAME	RELATIONSHIP	PHONE
Guardian's Signature:		Date: