



Pike Liberal Arts School

301 Kervin Drive
Troy, AL 36081
334.566.2023 (office)
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www.pikelib.com

Confirmation Letter: Voluntary Return to Campus

Pike Liberal Arts School (PLAS) understands that it is the parents' voluntary decision to permit their child to resume on-campus athletic activities. The school will implement management and control measures in accordance with relevant regulations to mitigate the risk of the spread of COVID-19. **Do keep in mind however, that managing risks doesn't mean there will be no transmission. There's no such thing as zero risk**, but we can take measures that will mitigate the chances of the spread on our school grounds. However, parents are also responsible for taking measures to mitigate the risk that their child(ren) may present a risk to their own health or the health of others when on school grounds.

1. I, _____ (parent's full name), hereby certify that my child _____ (child's full name), has permission to return to the PLAS campus and participate in all athletic activities as determined and permitted by the school.
2. I agree to monitor my child's health each day and keep my child home if he/she has a fever at or above 100.4 degrees, cough, fatigue, and/or other physical symptoms that require observation, health isolation, or medical treatment.
3. If my child is sent home he or she cannot return to school for 48 hours from the day he or she is sent home, and upon return, must be symptom-free and fever-free without medication.
4. I understand that I must have a physician's release in order for my child to return to athletic activities after any such illness.
5. I agree to accept the management and control measures taken by the school in accordance with relevant regulations to reduce the spread of COVID-19.
6. I understand that these are risk-management measures and that the school cannot guarantee safety for all students or prevent them from contracting any illness.
7. It is understood that parents may not enter the building or enter school grounds but must follow the drop-off and pick up procedure as outlined by the school.



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By voluntarily allowing my child(ren) to participate in athletic activities at Pike Liberal Arts School, I acknowledge and agree that I am assuming the risk of my child(ren) or myself possibly contracting COVID-19. Further, I acknowledge and agree that on my behalf and on behalf of my child(ren) I am voluntarily waiving any claim of liability against Pike Liberal Arts School should my child(ren) or I contract COVID-19 as a result of participating in athletic activities. Further, I expressly agree to hold Pike Liberal Arts School harmless should I and/or my child(ren) contract COVID-19 as result of our voluntary participation in the school's athletic activities.

Parent Signature: _____

Student Signature: _____

Date: ____ / ____ / ____