Parents,

There are a number of guidelines that we are following for Darlington Summer Programs, and wanted to share a few with you:

• Campers will be in groups of less than 20.
• Campers cannot attend camps/practices if they have a fever, determined by a thermometer reading 100.4 or higher or by subjective signs such as flushed cheeks, fatigue, extreme fussiness, chills, shivering, sweating, achiness, headache, not eating or drinking.
• Any athlete is subject to a health screening, including questions and a temperature reading.
• Parents will drop-off campers in a designated spot in the Huffman Athletic Center parking lot to limit contact. We do not encourage campers to ride together who have not been quarantined together.
• Campers will need to bring their own lunch, snacks, and water, clearly labeled. Water fountains will not be available.
• We will sanitize and disinfect between campers’ usage of equipment. We encourage campers to use soap and water and/or hand sanitizer before touching their face or nose.
• We will sanitize and disinfect common spaces, such as bathrooms.
• We will continue to follow the Georgia Department of Public Health and CDC Guidelines.

Darlington School Permission Waiver

I, the undersigned parent or guardian, do hereby grant permission for my child, ____________, to participate in the 2021 summer camp programs at Darlington School. I understand that this out-of-school activity involves risk to the participant. I further acknowledge and understand that there is a possibility that my child may sustain physical injury or illness (minimal, serious or catastrophic) in connection with his/her participation. I further acknowledge and understand that my child is assuming the risk of such physical injury or illness by his/her participation. I further release Darlington School and its representatives from any claims for personal injury or illness that my child may sustain during participation in this camp. I further understand that Darlington School has established rules and regulations pertaining to conduct, behavior, activities and health/hygiene of all students by which my child must abide during participation in this program, and that my child and I will be responsible for his/her failure to abide by those rules and regulations.

My child and I have read and understand the above Liability Release.

___________________________________________________________       __________________________
Parent or Guardian Signature                        Date