



Charlene Adzima Music

COVID-19 Pandemic Consent Form for In-Studio Lessons

I, _____ (name of parent or adult student) knowingly and willingly consent to in-studio lessons for myself or my child/children _____ (name of child/children) during the COVID-19 Pandemic.

Before each lesson, I will check if I, my child/children, or anyone in my household have exhibited any of these symptoms of COVID-19 during the last 14 days:

- Fever above 100 degrees
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- New loss of taste or smell

I agree to notify Charlene Adzima if I, my child/children, or any member of our household contracts COVID-19 or has come into contact with someone who tested positive for COVID-19.

I understand that I am choosing to come in for lessons for myself or my child/children. By coming in for lessons I understand that I am doing so at my own risk and will not hold Charlene Adzima liable for contraction of any illnesses.

Signature: _____ Date: _____