**DCM Parent Agreement**

We need everyone’s help in creating the safest possible environment.

I want to do my part to help DCM keep my child(ren), other dancers, the instructors, other families and everyone else at the studios as safe as possible during the Covid-19 pandemic and beyond it. I have read, understood and agree to follow the following policies and procedures.

**I understand and agree that:**

* I will drop my dancer off and pick him/her up at the designated entrance to the studio.
* For younger dancers, please let us know if you need to accompany your child into the building. Only one parent or non-participating individual will be allowed to enter the building at the main entrance for drop off of younger children.
* All adults are required to wear a mask when entering the facility.
* I will have my dancer arrive dressed and ready for class as dressing rooms will be closed.
* I am aware that my child may wear a mask but that she is not required to do so.
* I will support the social distancing standard of at least 6’ outside and inside the facility and educate my child on this protocol.
* Class times have been adjusted to ensure time for the dancers to get in and out of the studio without a crowd, to provide time to wipe down the equipment between each class and for teachers to thoroughly wash their hands.
* My dancer will have regular opportunities to use their hand sanitizer, starting with prior to entering the building.
* My dancer will use the restroom and wash their hands thoroughly before leaving home and while at the studio as needed.
* My dancer will bring a clearly marked dance bag to the studio each day with all recommended items included.
* I will have my dancer wash hands and feet thoroughly upon arriving back home and her bag and items in the bag will be cleaned upon arriving home and again before she brings it back into the studio.
* I will bring a sign with my dancer’s full name on it for pickup.
* I agree to keep my dancer home if he/she is not feeling well or anyone in household has any Covid-19 symptoms such as coughing, has a temperature over 100 degrees, fever, chills, body aches, sore throat.
* I understand and agree that these procedures will change and evolve over time and that I will follow any new standards required by the State of Maryland and/or DCM.
* I understand that the instructors and everyone at the studio will make a strong effort to maintain social distancing but that there will be times when incidental contact and less than prescribed physical distancing will occur.
* I further understand that I am voluntarily allowing my child to participate in programs and activities offered by DCM knowing that even with increased sanitation and enhanced hygiene protocol, it is impossible to provide a completely sterile environment so the risk of Covid-19 exposure and other viruses may exist. I accept that risk.

Dancer’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_