

MMAS Academy Waiver

I, _____ have enrolled my child _____
in the following summer intensives at the MMAS Academy, occurring May 1, 2021 - September
1, 2021 at 888 South Main Street, Mansfield MA 02048.

I have reviewed the safety measures MMAS is performing to assure my child's safety as set forth in the MMAS Academy Reopening Procedures, a copy of which has been provided to me, and I understand my role in helping MMAS maximize these measures. I am confident that my child will be kept as safe as possible and that MMAS is exceeding measures as laid out by the WHO and CDC. My child and I further understand that should it become necessary to quarantine during the summer of 2021, MMAS classes will resume on-line. I agree to keep my child home if he/she/they exhibits any Covid symptoms and I also agree to advise MMAS immediately should anyone in my household test positive for Covid. I understand the risks of allowing my child to participate in a group setting but remain confident in the protocols MMAS has adopted.

SIGNATURE

DATE