

St. Gabriel Consolidated School

Mask Opt-Out Form

2021-2022 School year

St. Gabriel Consolidated School recommends and encourages all individuals to wear a mask while attending school and school related activities. If you give your permission for your child/children to participate without a mask, please sign and return this letter. Without written consent, students will be required to wear a mask during all indoor school activities.

We, the undersigned parent(s), acknowledge and agree that, as a student at St. Gabriel Consolidated School and as parent(s) of that student, entering in the school or being on the premises, having personal contact with teachers, classmates, and other St. Gabriel Consolidated School staff, involves a certain degree of risk, namely of parent(s) and/or student acquiring a communicable disease, including COVID-19, and then potentially passing it on to others, including family members. Due to the highly contagious nature of COVID-19, the characteristics of the virus, and the close proximity of students, teachers, and staff at St. Gabriel Consolidated School, there is an elevated risk of student contracting the disease simply by being in the building, on the premises, or at any St. Gabriel Consolidated School function.

We acknowledge and agree that after carefully considering the risks involved, and having the opportunity to discuss these risks with any healthcare professional(s) of our choosing, we voluntarily and willingly accept those risks and acknowledge that returning to in-person classes and other in-person St. Gabriel Consolidated School functions is the choice of each family, including ours. **By signing below, we give our permission for our child/children to attend St. Gabriel Consolidated School and participate in all St. Gabriel Consolidated School activities without wearing a mask.** According to federal mandates, all students must continue to wear a mask when riding in a school bus.

We do hereby accept and assume sole responsibility for any illness acquired by student or parent(s) while at St. Gabriel Consolidated School or any St. Gabriel Consolidated School function, including possible infection with COVID-19.

Upon notification, the school reserves the right to amend safety protocols, including mask mandates, as needed.

Student's Name(s)	Student's Homeroom(s)

Parent's Name (please print) \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_