

TLC Preschool

Parent/Guardian Agreement

To protect students and TUESD staff, I will keep my child home until they are cleared by a doctor if they have been diagnosed with any of the following:

- Dermatitis
- Scabies
- Impetigo
- Strep throat/Scarlet Fever
- Ringworm
- Meningitis
- Hand, Foot, and Mouth Disease
- Chicken Pox
- Mumps or Measles
- Pink Eye
- Roseola
- Flu
- COVID 19
- RSV

Additionally, I will keep my child home until 24 hours after symptoms resolve if they have any of the following:

- Fever (temp of 100.4 or higher)
- Persistent cough
- Shortness of breath, difficulty breathing
- White or yellow discharge from eyes (unless a signed clearance from physician is provided)
- Vomiting
- Diarrhea
- Head lice (TLC has a no-nit policy)
- Green Nasal discharge (unless a signed clearance from physician is provided)

Or any two of the following:

- Sore throat
- Chills
- Muscle pain/body aches
- Headache
- New loss of taste or smell
- Upset Stomach
- Nasal congestion
- Runny nose
- Fatigue
- Nausea

If your Child has tested positive for COVID 19, please call the office for the most up to date procedures.

1. I agree to provide at least two working phone numbers as emergency contact who could pick up my child during school hours.
2. I agree to make all efforts to pick up my child within 30 minutes of receiving a sick call.
3. I agree to make all efforts to communicate with staff regarding my child's health, and update them if there are any changes to health, allergies, medication, etc.

Childs Name: _____

Parent/Guardian Name: _____

Date: _____