COVID-19 PARENTAL ACKNOWLEDGEMENT
FOR MIT IN-PERSON PROGRAMS FOR MINORS

This COVID-19 Acknowledgement must be completed for all in-person programs for minors, operated by MIT departments, labs, centers, or student clubs, in addition to MIT’s general requirements for minors programs.

In accordance with MIT’s vaccination requirements, children aged 5 and up must be fully vaccinated or have a religious or medical exemption in order to participate in MIT programs and events. (MIT’s Policy on K-12 students and programs provides further details on vaccination, exemption, and booster requirements: https://now.mit.edu/policies/k-12-students-and-programs/ ). Minors must meet the vaccination and booster requirements prior to the start of the program or as soon as they are eligible.

I, ____________________________, acknowledge the following requirements (which may be subject to change at any time):

1. My child, with my assistance, if necessary, will self-screen each day for potential COVID-19 symptoms prior to participating in the program. Such symptoms may include, without limitation, recent loss of taste, fever, cough, sore throat, shortness of breath, gastrointestinal distress, muscle aches, or cold-like symptoms (any/all of which are not attributed to a chronic illness or condition). I agree that my child will not attend the program if experiencing any of these symptoms or if otherwise feeling unwell.

2. I agree to provide MIT with my child’s vaccination status and with my contact information prior to the start of the program. I agree to provide any updates on receipt of the booster shot (if applicable) in order for my child to remain eligible to participate. I understand that MIT will collect this information through its Tim Tickets system and that it may be shared with MIT Medical and local public health authorities.

3. I agree to notify the MIT Program Manager as soon as possible if my child tests positive for COVID-19, for contact tracing purposes.

4. I agree that my child will wear a face covering in all indoor settings, except when eating or drinking. If my child is unvaccinated, I agree that my child will wear a face covering in outdoor settings when unable to maintain a physical distance of at least three feet.

5. I agree to be bound by, execute, and submit MIT’s liability release to the MIT Program Manager (or other designated MIT contact).

I acknowledge the importance of complying with these protocols. While compliance with these protocols is expected to help mitigate the spread of COVID-19, I understand that the risk cannot be completely eliminated, and I knowingly and voluntarily accept all such risks related to illness and infectious diseases, such as COVID-19.

By permitting my child to attend and/or participate in this program, I agree that MIT, including its employees, contractors, students, volunteers and authorized agents (collectively, the “MIT parties”), is not responsible for my child’s exposure to, contraction and/or transmission of COVID-19, and agree to fully release the MIT parties from such liability to the fullest extent permitted by law.

________________________________________  ____________________________
Signature of Parent/Guardian                      Date