



## COVID-19 MASK DISCLAIMER

Please understand that using face masks are not a replacement for medical grade Personal Protective Equipment.

Please remember that use of face masks is not intended to replace other recommended measures to stop the community spread of COVID-19, such as social distancing, washing your hands and refraining from touching your face. Follow the latest advice of the CDC and your own health care professionals as to how best to keep yourself safe.

\_\_\_\_\_ can and will agree to wear a mask while at CRWM.  
Student Name

\_\_\_\_\_ cannot and will not wear a mask while at CRWM.  
Student Name  
A copy of a note (signed and dated) from a medical practitioner is attached with this form.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

