



# COVID-19 HEALTH & SAFETY PLAN

The safety and health of our staff, students and families remains our #1 priority

## Illness

- Please, do not come to the studio if you have a cough, fever or are sick.
- Please, do not come to the studio if you have tested positive, or have had COVID-like symptoms, within the past 14 days.
- Please, do not come to the studio if you had close contact with a person who has tested positive for COVID-19, or has had COVID-like symptoms, within the past 14 days.
- If you have traveled outside of our local area, we ask that you please consider not coming to the studio for 7-14 days following your return.
- All persons entering the building will be required to answer health and symptom questions as part of our routine health screening.
- We reserve the right to take temperatures of anyone entering the studio using non-contact, infrared thermometers.
- Anyone with a temperature of 100.4 °F, or above, will be asked to leave the studio.
- All families are required to sign our COVID waiver before beginning any season or program.

## Students

- Students must be registered in advance for class in order to enter the building. **There will be NO drop-in students allowed.**
- Students must come dressed and ready for class.
- Students cannot change clothing anywhere within the studio.
- Students should bring the absolute minimum inside the studio.
- Students should bring their own water with a resealable lid. **Water fountains will be turned off.**
- Students with multiple classes in one day, that are not back-to-back, must leave the studio until their next scheduled class time.

## Face Coverings

Following Virginia's Executive Order 63 Regarding Face Coverings:

- Everyone entering the studio must wear a face covering.
- Face coverings include any mask, shield or covering of both the nose and mouth. Face coverings must be properly worn with both nose and mouth covered.

- **Students are not required to wear face coverings** while actively engaged in dancing or other exercise activities. Students who prefer to wear a face covering while actively engaged in dancing may do so.
- Students must wear face coverings while entering and exiting the dance rooms, bathrooms and anytime 6 feet of social distancing is not possible.
- While optional when dancing/exercising, face coverings are strongly encouraged by the CDC/VA Department of Health as an effective tool to minimize the spread of COVID-19.

For more information on Virginia Executive Order 63 regarding face coverings, please visit: [Virginia Executive Order 63--Face Coverings](#).

## Lobby / Studio

- The building will be limited to students, faculty and staff.
- All parents, guardians, siblings and family members must wait outside of the building.
- Everyone entering the building must use hand sanitizer. Hand sanitizer will be readily available throughout the building.
- **All lost and found items will be disposed of at the end of each business day.**

## Classes / Classrooms

- Due to social distancing, individual class sizes will be smaller and available only on a first come, first served basis.
- Teachers will refrain from “hands-on” corrections, and instead will use visual and verbal corrections.
- Classes will be shortened for dismissals and cleaning:  
60-minute classes will now be 50 minutes;  
90-minute classes will now be 80 minutes.
- Faculty must wear face coverings during class, except when actively dancing or exercising.
- Students must abide by their "assigned" marked social distancing area for each class.

## Restroom

- Students should go to the restroom before coming into the building.
- The restroom will be limited to students, faculty and staff.
- Restrooms will be wiped down frequently each day by staff.

## Cleaning

- All frequently touched surfaces will be cleaned after every class.
- A professional cleaning company will come in during our off hours for deep cleaning and sanitizing at least twice per week.

## Drop-Off

- Doors will open 5 minutes prior to class time.
- Students must enter through the front lobby.
- For our non-driving students, a parent or guardian **MUST** remain with the student until the health questionnaire and temperature scan are completed and the student is cleared to remain in the building.
- Students will be lined up in the front lobby by class.
- Students will be escorted to their classrooms.

# Dismissal

- Depending on time and numbers of students, Studio 1 and Studio 2 classes will be dismissed from our front lobby doors, or through the basement and out the side door on the parking lot side of the building.
- Studio 3 classes will be dismissed down the back staircase and out the side door and walked around to the parking lot.
- Students will be escorted and dismissed individually by class.
- Non-driving students must be released to a parent / guardian at their designated dismissal door.
- Students must be picked up on time. No exceptions.

# Tuition / Payments

- If you pay by check, tuition, payments and/or fees can be dropped off in our outside drop box (on the brick wall to the right of the entry doors), sent in with students during regular business hours, or mailed to our office: 3356 Ironbound Road, #501, Williamsburg, VA 23188
- No tuition and/or fees will be prorated.

**Everyone entering Institute for Dance, Inc. must agree with, and follow, our COVID-19 Health and Safety Plan which may change at any time.** If you have any questions, please email: [info@institutefordance.org](mailto:info@institutefordance.org)

*Last Updated: July 28, 2020*



## **Routine COVID-19 Health Check**

Temperature Scan (100.4 or higher may not stay in the building)

Have you (or your student) had any of the following symptoms in the last 14 days?

- Fever or chills
- Cold symptoms: cough, congestion or runny nose, sore throat
- Shortness of breath or difficulty breathing
- Nausea, vomiting or diarrhea

Have you tested positive for COVID or had COVID-like symptoms in the last 14 days?

Have you (or your student) been exposed to someone who has tested positive for COVID-19 or had COVID-like symptoms in the last 14 days?

Have you or anyone in your household traveled outside of the area in the last 14 days? (If yes, where?)



**COMMUNICABLE DISEASE  
RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT**

The individual named below (referred to as "I" or "me") desires to enter the premises of The Institute for Dance, Inc., a Virginia non-stock corporation (the "Organization") located at 3356 Ironbound Road, Suite 501, Williamsburg, VA 23188 (the "Premises") to participate and/or engage in its events or programs, including, but not limited to, classes, events and activities, observation and/or use of facilities or equipment, participation in or acting as a spectator during any program (the "Activities"). As lawful consideration for being permitted by the Organization to be on the Premises and engage in the Activities, I agree to all the terms and conditions set forth in this agreement (this "Agreement").

1. I understand that the 2019 novel coronavirus disease (COVID-19 or severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)) and/or any mutation or variation thereof (the "Disease"), is an extremely contagious virus that spreads easily through person-to-person contact. Federal and state authorities recommend social distancing as a means to prevent the spread of the Disease. The Disease can lead to severe illness, personal injury, permanent disability, and death. Participating in the Organization's programs or accessing the Organization's facilities could increase the risk of being exposed to and contracting the Disease. I acknowledge that this risk may result from or be compounded by the actions, omissions, or negligence of others, including the Organization's employees. I understand that while the Organization has implemented preventative measures to reduce the spread of the Disease, the Organization cannot guarantee that I will not become infected with the Disease or other infectious diseases while on the Premises or other facilities used by the Organization and that being on the Premises or other facilities used by the Organization may increase my risk of contracting the Disease. NOTWITHSTANDING THE RISKS ASSOCIATED WITH THE DISEASE, I ACKNOWLEDGE THAT I AM VOLUNTARILY ENTERING THE PREMISES OR OTHER FACILITIES USED BY THE ORGANIZATION TO ENGAGE IN THE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED. I HEREBY AGREE TO ACCEPT AND ASSUME ALL RISKS OF PERSONAL INJURY, ILLNESS, DISABILITY, DEATH, OR PROPERTY DAMAGE RELATED TO THE DISEASE, ARISING FROM MY BEING ON THE PREMISES OR ENGAGING IN THE ACTIVITIES, WHETHER CAUSED BY THE NEGLIGENCE OF THE ORGANIZATION OR OTHERWISE.
2. I, for myself and on behalf of my heirs, assigns, personal representatives, children and next of kin (collectively, "Releasers"), hereby expressly waive and release any and all claims, now known or hereafter known, against the Organization, and its officers, directors, employees, agents, affiliates, successors, and assigns (collectively, "Releasees"), on account of injury, illness, disability, death, or property damage arising out of or attributable to my being on the Premises or other facilities used by the Organization or engaging in the Activities and being exposed to or contracting the Disease, whether arising out of the negligence of the Organization or any Releasees or otherwise. I covenant not to make or bring any such claim against the Organization or any other Releasee, and forever release and discharge the Organization and all other Releasees from liability under such claims.
3. I am familiar with federal, state, and local laws, orders, directives, and guidelines related to the Disease, including the Centers for Disease Control and Prevention (CDC) guidance on the Disease. I will comply with

all such orders, directives, and guidelines while on the Premises or other facilities used by the Organization. I will also follow all instructions of the Organization while on the Premises or other facilities used by the Organization. I agree not to enter the Premises or other facilities used by the Organization if I am experiencing symptoms of the Disease (such as cough, shortness of breath, or fever), have a confirmed or suspected case of the Disease, or have come in contact in the last fourteen (14) days with a person who has been confirmed or suspected of having the Disease.

4. I shall defend, indemnify, and hold harmless the Organization and all other Releasees against any and all losses, damages, liabilities, deficiencies, claims, actions, judgments, settlements, interest, awards, penalties, fines, costs, or expenses of whatever kind, including attorney fees, fees, and the costs of enforcing any right to indemnification under this Agreement, and the cost of pursuing any insurance providers, arising out or resulting from any claim of a third party related to the Disease due to my engaging in the Activities or being on the Premises or using other facilities used by the Organization.
5. This Agreement constitutes the sole and entire agreement of the Organization and me with respect to the subject matter contained herein and supersedes all prior and contemporaneous understandings, agreements, representations, and warranties, both written and oral, with respect to such subject matter. If any term or provision of this Agreement is invalid, illegal, or unenforceable in any jurisdiction, such invalidity, illegality, or unenforceability shall not affect any other term or provision of this Agreement or invalidate or render unenforceable such term or provision in any other jurisdiction. This Agreement is binding on and shall inure to the benefit of the Organization and me and our respective successors and assigns. All matters arising out of or relating to this Agreement shall be governed by and construed in accordance with the internal laws of the Commonwealth of Virginia without giving effect to any choice or conflict of law provision or rule (whether of the Commonwealth of Virginia or any other jurisdiction).

**I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I AM GIVING UP SUBSTANTIAL LEGAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.**

\_\_\_\_\_  
Participant Name

\_\_\_\_\_  
Participant Age

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date (mm/dd/yyyy)

**FOR PARENTS/GUARDIANS OF PARTICIPANT OF MINOR AGE (UNDER AGE 18):**

This is to certify that I, as parent/guardian with legal responsibility for the below-named minor child participant, do consent and agree to his/her release as provided above of all the Releasees, and for myself and for the other Releasees, I do hereby release and agree to indemnify and hold harmless the Releasees from any and all liability incidents to my minor child's involvement or Participation in the Activities as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law.

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Minor Child Participant's Name

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

\_\_\_\_\_  
Date (mm/dd/yyyy)