

# PRESCHOOL RE-ENROLLMENT FORMS FOR RETURNING STUDENTS 2023-2024 Academic Year

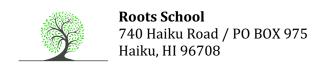
	ease complete the following required forms:	
	Student Information	
	Enrollment Contract	
	Financial Responsibility / Late Payment Form	
	Liability Agreement	
	Media Release and Excursion Permission Form	
Ц	Parent/Guardian Participation and Parent Handbook F	orm
Ple	ease complete the following forms if any information	has changed since the last school year:
	Parent/Guardian Contact Information	has changed since the last school year.
	Emergency Treatment Consent Form	
	Student Drop off and Pick-Up Information	
	Health and Medical Insurance Information	
The	e following do not need to be submitted if already or	n-file w/ Roots School:
	Physical Examination Report from a Physician	
	Student's Health Record Form (to be completed by a I	Physician)
	Students must have a Tuberculosis (TB) clearance	
	Immunization Records (to be provided by a Physician	or Request for Immunization Exemption form
A 11		
		ns of the student when both parents/guardians have joint
	d/or legal physical custody, regardless of marital sta	
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# STUDENT INFORMATION

Entering Grade: PRESCHOOL	Date:
Child's Legal Name	
Mailing address, if different from above	
	RDIAN CONTACT INFORMATION
Parent/Guardian #1 Name	
	Cell phone
Email	
Employer	
Parent/Guardian #2 Name	
	Cell phone
Email	
Employer	Work phone
Parent/Guardian #3 Name	
Home phone	
Email	
Employer	
Parent/Guardian #4 Name	
Home phone	
Email	

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		11 11 ()		

Sibling #1:	(age:	_)	Sibling #2	(age:	)
Sibling #3:	(age:	)	Sibling #4	(age:	)

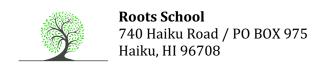


# EMERGENCY TREATMENT CONSENT FORM

Child's Legal Name	
	TT DI
Description to Contact in Engage	
Parent/Guardian to Contact in Emergency:	
Call Phone #1	Call Phone #2
Email	
Physician's Name	
Physician's Address	
Physician's Phone Number	
Emergency Contact ( <mark>if Parent/Guardian is un</mark>	
Name	
Relationship to Child	
	Call Phone #2
Address	
	OP OFF and PICK-UP INFORMATION lease list who is authorized to bring your child to school, and pick up your in writing)
First and Last Name	
Relationship to child	Phone
First and Last Name	
	Phone
First and Last Name	
Relationship to child	

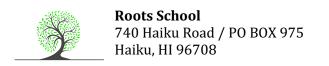
# **HEALTH and MEDICAL INSURANCE INFORMATION**

Special Medical Issues (include anything we should	d be aware of):
Allergies:	
History of asthma? Yes / No History of seizures or other loss of consciousness? History of heart problems? Yes / No	Yes / No
If you answered "yes" to any of the above, please eoccurrence and frequency of asthma attacks and/or	explain in detail the nature of their condition, including date of last seizures.
May be given as necessary: Ibuprofen? Yes / No	Tylenol? Yes / No
Any specific activities your child is not able to part	ticipate in?
Medical Insurance Carrier	
Member ID Number	Group Number
Insured's Name	
I hereby give my consent in advance to Roots Schoemergency treatment as in their judgment is reason including taking specimens and x-rays, giving bloodependent listed above. I understand that Roots Schot that this consent is given in case I am not available	pool and to the physicians or hospital selected by them to render hably necessary, including, but not limited to, hospitalization, diagnosis od transfusions and medications, anesthesia and surgery for my chool will attempt to contact me before securing medical treatment, but in an emergency. I specifically release Roots School from any and all for from any accident or other occurrences causing injury to any person
Name of Parent/Guardian #1 (print)	
Signature	Date
Name of Parent/Guardian #2 (print)	
Signature	



# MEDIA RELEASE PERMISSION

As the Parent/Guardian of (print legal name of chil	ld)	
I understand if I grant permission for certain types	,	ce and/or work may be displayed
and/or used in Roots School publications develope	•	• • •
	·	
Please initial inside the box to grant or deny permi	ssion for the each of following:	
Media Release Permission For	I Grant Permission	I Do Not Grant Permission
Advertisements for Roots School		
(Website, Flyers, magazines, etc.)		
Social media posts		
(Facebook, Instagram, Weekly Newsletters)		
Internally only		
(Roots YouTube Channel, Class Dojo, Class		
emails)		
DV.C	MIDGION BEDINGGION	
EXC	URSION PERMISSION	
☐ I grant permission to Roots School to take my c	hild on outings in the communit	y.
☐ I do not grant permission to Roots School to tak	e my child on outings in the con	nmunity.
By signing below, I/we affirm that all of the inform	nation on this page is correct:	
Name of Parent/Guardian #1 (print)		
Signature	Date	e
Name of Parent/Guardian #2 (print)	· · · · · · · · · · · · · · · · · · ·	
Signature	Date	e



#### PRESCHOOL ENROLLMENT CONTRACT FOR THE 2023-2024 ACADEMIC YEAR

In order to guarantee a space for your child in the upcoming academic school year, all paperwork must be completed and submitted to Roots School no later than **January 15, 2023**, and all families must be signed up for **FACTS** no later than **March 1, 2023**.

Roots School requires all families to use FACTS, an online management system to process tuition and fee payments. Sign up for FACTS at: https://online.factsmgt.com

# ANNUAL TUITION AND FEES \$9,750 + ONE-TIME \$25 Field Trip Fee

Please indicate the payment plan selected by initialing next to it and signing the agreement on next page.

Due by April 1, 2023	CTS charges a one-time set-up fee of \$5 for this plan \$9,675 Tuition Prepayment #1 (\$9,650 + one-time, non-refundable
field trip fee of \$25)	
	FACTS charges a one-time set-up fee of \$10 for this plan
Due by April 1, 2023	\$4,875 Tuition Prepayment #1 (\$4,850 + one-time, non-refundable
field trip fee of \$25)	
Due by June 1, 2023	\$4,850 Tuition Prepayment #2
Due by April 1, 2023refundable field trip fee of \$25)	\$837.50 Tuition prepayment #1 (\$812.50 + one-time, non-
	\$812.50 Tuition prepayment #2
	\$812.50 Tultion prepayment #2
	\$812.50 Tultion prepayment #3
	\$812.50 Tultion prepayment #4
	\$812.50 Tultion prepayment #5
	\$812.50 Tultion prepayment #7
	\$812.50 Tultion prepayment #7 \$812.50 Tuition prepayment #8
	\$812.50 Tultion prepayment #8 \$812.50 Tultion prepayment #9
	\$812.50 Tultion prepayment #9 \$812.50 Tuition prepayment #10
•	\$812.50 Tultion prepayment #10 \$812.50 Tuition prepayment #11
•	\$812.50 Tultion prepayment #11
Due by March 1, 2024	\$612.30 Tuttion prepayment #12

- \* Please note that the monthly installment schedule does not correspond to the service received that month. The installment schedule is merely a convenient way to meet your total financial obligation.
- \*\* Reflects \$100 Roots discount for one tuition payment
- \*\*\* Reflects \$50 Roots discount for two tuition payments

All enrolled Roots students are enrolled for the FULL ACADEMIC YEAR. Roots shall not make any adjustments in tuition payments for absences, vacations, withdrawal, and/or dismissal. In addition, the Enrollment Contract is not contingent on any specific teacher at the time of enrollment and throughout the academic year.

All tuition and fees paid, including pre-payments, are non-refundable. Refunds shall not be given, even if a rise in COVID cases requires a temporary shift to hybrid or distance learning. Such shift to any format, other than in class learning, shall be at the requirement of state or local mandates and may be at the absolute discretion of Roots. Such discretion shall be reasonable. If tuition assistance is cancelled for any reason, Roots School must be notified in writing immediately.

Enrollment Policy: All required paperwork for the 2023-2024 academic year must be completed and submitted to Roots School no later than January 15, 2023.

If submitted after January 15<sup>th</sup>, families are charged with a \$500 late enrollment fee.

Enrollment may be cancelled by the parents/guardians in writing, without penalty (except forfeiture of the Non-Refundable prepayments) prior to February 1, 2023.

If enrollment is cancelled on or after February 1, 2023, parents/guardians financially responsible for the student(s) are still obligated to pay the full annual tuition and fees. No portion of tuition paid or outstanding will be refunded or cancelled in the event of absence, vacations, withdrawal, and/or dismissal from the school of the above student.

# Optional: "Your extra is someone else's need" fundraiser

We understand that the cost of tuition can be a heavy burden for families with lower incomes, and we've seen more and more cases of financial hardship within our Roots community in recent years. It is heartbreaking to witness parents struggling to make ends meet, which is why we made it our priority this year to keep tuition costs at the same rate as in previous years.

While some 'Ohanas can hardly afford tuition at a private school, others can do so more easily, and this fundraiser allows families to give more. All proceeds go directly towards our tuition assistance program, which helps families by welcoming students who might not be able to attend Roots without the support.

If you can and would like to give more than the cost of your keiki's tuition, please specify your desired donation amount below – because your *extra* is someone else's *need*.

0	Yes, I would like to give extra in the amount of \$
	<ul> <li>My donation is enclosed (Check or Cash)</li> </ul>
	o I have made my donation via the "Donate" button on the Roots Website in the name of
	via PayPal

We would like to note that any donation beyond the cost of tuition is tax deductible. For tax purposes, please find our tax number below:

EIN- 27-2634578



# Roots School 740 Haiku Road / PO BOX 975 Haiku, HI 96708

Communication: Parents/Guardians agree to inform Roots School of any major incident or situation that may impact their child's ability to focus or perform at school and agree to work closely with the school and his/her teachers to ensure their child's safety and success, and the safety of other Roots School students, teachers, and administrators. Parents/Guardians also acknowledge and agree that Roots School shall communicate with all Parents/guardians identified on this Enrollment Contract regarding their child. In an effort to keep all lines of Roots School's communication open, clear, and consistent with Parents/Guardians, Roots School shall make reasonable efforts to maintain written communication (such as letters, email or text). Roots School shall use its best efforts to maintain such written communication in simultaneous communication to all Parents/Guardians listed on this Enrollment Contract.

Late Payment Fees and Return Payment Fees: A late fee of \$20 will be assessed for any payment not received within nine (9) days of the due date as outlined within your FACTS enrollment contract. Tuition and fees are considered past due thirty (30) days after the billing date. In addition to the late fee, an interest rate of 1.5% per month may be applied to delinquent accounts until the overdue amount is paid. Late and penalty fees charged by Roots School do not include the additional fees that may be charged by FACTS for returned payments.

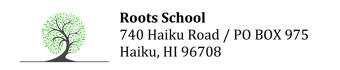
Hardship Requests: Parents/Guardians who have difficulty making timely payments must contact the Roots School office, in writing, to arrange a satisfactory payment arrangement ("Hardship Requests"). Hardship Requests for alternate payment plans shall be reviewed and either approved or denied by the Roots School Board of Directors. Failure to comply with a Board approved alternate payment plan shall result in immediate dismissal of the child from Roots School. When such arrangements have not been made, an account in arrears for more than forty-five (45) days shall be sent to a collection's agency or attorney. Parents/Guardians shall be responsible to pay all collection fees, attorney fees, and any other costs associated with collection of any outstanding amounts.

**Withdrawal Policy:** Withdrawal from Roots School prior to the end of the academic year has an impact on the students socially and on Roots School operationally. No refunds shall be remitted for early withdrawal from academic school year. When a family commits to Roots School, they are making a full year commitment and tuition is due and owing at the beginning of the year, regardless of any staff or teacher changes.

Families that intend to withdraw from Roots School must notify Roots School at least thirty (30) days prior to withdrawal in writing by Certified U.S. Mail or in-person. If a request to withdraw is cancelled, the student will be allowed to continue at Roots School provided that the space has not already been filled by someone on the waiting list. If the student is re-enrolled, a \$50 administrative fee will be due and owing.

**Learning Differences:** In the event Roots School determines that it cannot meet the needs of a student identified with a learning difference and in the opinion of Roots School along with the student's teacher, the student would be better served at a different school, Roots School reserves the right to immediately terminate this Enrollment Contract. Roots School shall refund prepayment of tuition, in accordance with any remaining days of the academic school year.

**Dismissal Policy:** If the unfortunate circumstance arises in which Roots School determines that the student may not remain enrolled at Roots School and should be dismissed; tuition shall be forgiven in ratio to the remaining days of school, except in those instances in which the separation is due to a violation of these policies by the Parents/Guardians. Any and all fees paid are non-refundable.



By signing the Roots School Enrollment Contract for the 2023/2024 academic year, I/we accept all of the terms and conditions outlined in this Enrollment Contract and the Parent Handbook. Name of Parent/Guardian #1 (print) Signature\_\_\_\_\_ Date\_\_\_\_ Name of Parent/Guardian #2 (print) Signature \_\_\_\_\_ Date \_\_\_\_ FINANCIAL RESPONSIBILITY/LATE PAYMENT Name of Parent/Guardian responsible for full payment of tuition and fees as defined in the current Parent Handbook: (Print name) \_\_\_\_\_ Home Phone Cell Phone Email\_\_\_\_\_ Mailing Address Parent/Guardian Date of Birth \_\_\_\_\_ Social Security #\_\_\_\_

Relationship to Student

If requesting a sibling discount for this student, please write the name of oldest full-time paying student:

(print older sibling's name)



# Roots School 740 Haiku Road / PO BOX 975 Haiku, HI 96708

808-250-7988 office@rootsmaui.org www.rootsmaui.org

 $\textbf{LIABILITY AGREEMENT} \ between \ Roots \ School \ and \ the \ legal \ Parent(s) \ / \ Guardian(s) \ of$ 

(print name of student)	

#### **DEFINITIONS:**

- "Roots School" means teachers, employees, representatives, vehicles, property, and any place or location where lessons or activities may take place.
- "Parents/Guardians" means one or more legal guardians or persons otherwise responsible for making decisions on the student's behalf.
- "Family & Guests" means Parents/Guardians their children, siblings, and any children or adults who are their guests while they are present at or in the care of the Roots School.

#### ROOTS SCHOOL PREMISES:

Safety is always a significant concern and children are not put in dangerous situations; however, Parents/Guardians acknowledge that accidents can happen when children are playing or learning around natural conditions. Parents/Guardians hereby acknowledge that Roots School is located on a rural property. It is acknowledged by all parties that this is not a public school; many modern ideas as to what may be considered expected safety restraints, practices, equipment, warning signs, etc. in a public or school setting may not be present and are specifically not desired to be present by Parents/Guardians. Parents/Guardians expect and desire that there will be regularly occurring activities in alignment with the rural nature of Maui, such as animal handling, tree climbing, hiking, swimming, working with garden tools, and any and all activities in alignment with the rural nature of the area.

With full knowledge of the above facts and warnings, Parents/Guardians accept and assume all risks and responsibility involved in or related to any and all activities engaged in by their Family & Guests while on the Roots School property or in the care of Roots School staff.

#### **HOLD HARMLESS:**

Roots School does not assume any liability for loss, damage or injury to Family & Guests, persons or their personal property. Parents/Guardians acknowledge that the property is located in a rural community and Roots School has a natural experiential focus, and as such, while all reasonable safety measures for children are always taken, services provided to children are without warranty, guarantee or liability beyond those mandated for the protection of all children under the laws of the State of Hawaii and the United States of America.

#### **INDEMNITY:**

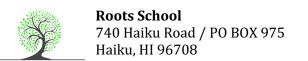
The undersigned, for himself/herself, his/her children, family & guests, heirs, assignors, executors, and administrators, fully releases and discharges Roots School from any and all claims, demands and causes of action by reason of any injury or whatever nature which has or have occurred, or may occur to the undersigned, or any of his/her children or family & guests as a results of, or in any connections with, Roots School including the use of the premises, property, structures, play equipment, off-property activities, and any and all other Roots School related property or activity, and agrees to hold Roots School and Roots School teachers, staff, volunteers, representatives, and Board, free and harmless of any claim or suit arising therefrom.

#### **JURISDICTION:**

Any action concerning the rights, duties or liabilities of the parties to this agreement will be decided within the State of Hawaii, County of Maui, and the parties stipulate and agree that all disputes between or arising out of this Agreement must first be submitted to confidential mediation in the County of Maui, State of Hawaii, in accordance with the Rules, Procedures, and Protocols for Mediation of Disputes of Dispute Prevention & Resolution, Inc. (based in Honolulu, Hawaii), then in effect. The mediators' fees and expenses are to be shared equally between the parties.

LIABILITY AGREEMENT ACKNOWLEDGMENT: Parents/Guardians acknowledge they have reviewed and understand the terms of the liability agreement and agree to be bound thereby.

Name of Parent/Legal Guardian #1 (print)		
Signature	Date	_
Name of Parent/Legal Guardian #2 (print)		_
Signature	Date	



808-250-7988 office@rootsmaui.org www.rootsmaui.org

#### PARENT/GUARDIAN PARTICIPATION FORM

All families are required to participate in Roots School work activities. Because of the diversity in family and students, parent hours are based on the number of parents/guardians active in the student(s)' lives. Irrespective of the number of children in a family, each parent/guardian is required to work 12 hours for the academic school year regardless of the total number of children in that family enrolled at Roots School.

Each family is also required to participate in the annual fundraiser.

My signature below indicates that I understand that as a Roots School parent, each parent in my family is responsible for a total of 12 parent hours per parent at Roots School. If I am not able to fulfill those hours with time, I may donate \$25 for each of the 12 hours. While any adult member of my family may participate, I am taking full responsibility for the fulfillment of hours:

### PARENT HANDBOOK ACKNOWLEDGEMENT

I/we, the undersigned acknowledge that I/we have read all of the above, and also agree to abide by the policies outlined in the current Roots Preschool Parent Handbook which is available on the Roots School website.

Name of Parent/Guardian #1 (print)		
Signature	Date	
Name of Parent/Guardian #2 (print)		
Signature_	Date	