

## Roots & Branches Forest School Registration Form

**Check Program: \*These ages are guidelines. Your child will be placed where the teachers think is the best fit for your child.**

- Buds (3.5 and 4 yrs)
- Roots (5-7 yrs)
- Branches (8-12 yrs)
- Tree-nagers (13 yrs and up )

**\*Please note that by completing this registration form you are signing a contract consenting to full tuition payment for the entire 2018-2019 school year. We hire our staff based on numbers at the beginning of the year and need to fulfill their contracts. If you wish to withdraw, you will still be accountable for fees unless a replacement is found.\***

### Participant Information:

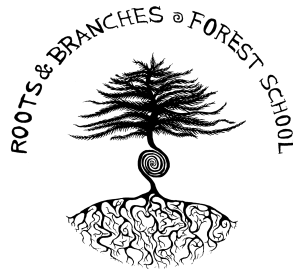
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Age: \_\_\_\_\_ Birth date (yy/mm/dd): \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_

### Allergies/Dietary Restrictions:

### Other Important Information:



### PARENTS OR GUARDIANS

	Parent #1	Parent #2
Last Name:		
First name:		
Address:		
Home Phone:		
Work Phone:		
Cell Phone:		
Email:		
Relationship to Child:		

### OTHER EMERGENCY CONTACT

Name:	
Relationship to Child:	
Phone:	
Your child will only be released to an authorized person listed on this form (parent/guardian and/or emergency contact). In case of an emergency or an unforeseen circumstance, please indicate the name, address and phone number of any other person/s who you authorize to pick up your child on your behalf.	
Name	Phone/Address
1.	
2.	
3.	
A parent/guardian's verbal authorization for pickup must be received before your child will be released to anyone not listed here. If not received, and we cannot notify you by phone, the child will not be released.	Please sign here.



### Medical Information

Doctor's Name:	
Health Card #	
Allergies:	
Medical problems:	
Medication:	
Additional Information: Please indicate likes/dislikes/special interests	

### PHOTO CONSENT

Connect The Dots, Roots & Branches Programs may wish to take pictures or video of the children and their families at various times throughout the year. The intended use of pictures would be for educational purposes, research, course assignments and to promote our program, or supply an educational audience with a visual concept of what a Forest school is. [Examples of this use could be newspapers, magazines, Parent Handbooks, or educational Journals]. Please indicate below whether or not you authorize Connect The Dots to use your child's picture for public display.

I hereby do authorize Connect The Dots, Roots & Branches Forest School to use

\_\_\_\_\_ picture for public display.

(Print name of child)

\_\_\_\_\_  
Parent/Guardian Signature      Print Name      Date



**\*Code of Conduct**

Developing an understanding of and responsibility for an individual’s potential and abilities includes accepting responsibility for individual actions. While under the leadership of skilled staff, the activities that your child will engage in as a participant at Connect The Dots, Roots & Branches Forest School involves risk – in choices made by the participant. As a condition of being allowed to participate in Roots & Branches Forest School programs, you warrant the participant is in good physical and mental health and that the participant shall not consume any substances which would impair the participant’s senses at any time during the program. You agree that intentional participant behaviour that puts the participant or others at physical or emotional risk will result in immediate dismissal from the program at the discretion of the Director. Expenses incurred because of program dismissal will be the responsibility of the participant/parent/guardian.

*Release*

I, the undersigned, permit participation in a full range of activities and authorize the Program Director or his/her appointee, in the event of an accident or illness, to authorize on my behalf all procedures, including admission to hospital and necessary treatment therein, as he/she may deem essential for the care and wellbeing of the participant. I also give my consent for Connect The Dots to use the participant’s photo taken at Roots & Branches Forest School programming which may be used for Roots & Branches Forest School educational purposes or promotions, unless Roots & Branches Forest School is advised otherwise in writing. I have read, understand and agree to the terms of the refund/transfer policy, code of conduct and payment procedures.

\_\_\_\_\_

Parent/Guardian Signature

\_\_\_\_\_

Name (please print)

\_\_\_\_\_

Date

**The Fine Print:**

- We will refund your deposit in the event that we cancel the program.
- Any person who leaves during the middle of a program due to illness, injury, expulsion, or any other reason will not be refunded any portion of the course fees unless suitable replacement is found.
- **Withdrawal Policy:** Should a family wish to withdraw their child from Roots & Branches Forest School they must give four weeks written notice to the school coordinator (at this time Natasha Robertson). This notice must include an end date so our staff may modify the program to accommodate farewells. We ask that the parents alert us in writing of any particulars they wish to include in this leave-taking. A REFUND FOR THE REMAINING TIME WILL ONLY BE ADMINISTERED IF A REPLACEMENT FOR YOUR CHILD IS FOUND. THERE WILL BE NO REFUND FOR MATERIAL or ADMINISTRATION FEES. Payment is required even if the child will not be attending. This arrangement allows the Forest school ample time to notify the families on our Waiting List and ensures a smooth transition as children move on from our program as well as compensating our teachers.



**Contract**

I am aware placement in program is not confirmed until initial payment is made. I am signing a contract to pay in full whether or not my child completes the school year. First payment includes administration and material fees. It is non-refundable. I am aware there is additional taxes this year.

Signature \_\_\_\_\_ Dated \_\_\_\_\_

*\*There is additional Taxes this year. Thank you in advance for respecting this contract.*

<b>Two payments:</b>	<b>NO BUS</b> This includes administration, tuition and material fees \$1700.	<b>WITH BUS</b> This includes bus, administration, tuition and mater \$2450.
June 1st	\$400 Non-refundable	\$450 Non-refundable
By September	\$1520	\$2320
<b>One Payment Total:</b>	<b>\$1920 (incl. tax)</b> <b>(\$1980 if using credit card)</b>	<b>\$2770 (incl. tax)</b> <b>(\$2850) if using credit card</b>

- **Payment Plan - Payments Due the 1st of every month. Valid Credit Card must be submitted.**

**Payment Plan- Due the 1st of every month. Valid Credit Card must be submitted.**

<b>6 Payments</b> includes Material fees, admin. fee, tuition, credit card and plan fee.	<b>NO BUS</b> \$1750	<b>WITH BUS</b> \$2500
June 1st	\$350 non refundable	\$500 non refund
July	\$300	\$500
August	\$300	\$400
September	\$300	\$400
October	\$300	\$400
November	\$300	\$400
December	\$270	\$390
<b>Total:</b>	<b>\$2120 (Incl.Tax/CCFee )</b>	<b>\$2990 (Incl.Tax/CCFee)</b>



Lump sum payments can be made by e-transfer, PayPal, cash, or cheque. Please make cheques payable to:

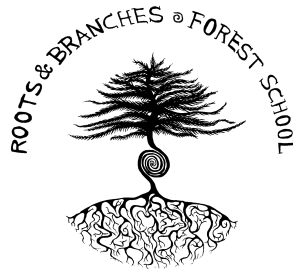
### Connect The Dots

- I have included session fee/s Total Amount \$ \_\_\_\_\_
- Date/s of payment \_\_\_\_\_
- Type of Payment circle (cash/etransfer/cheque/Paypal)
- I am aware this is a contract and of the above tuition fees
- \_\_\_\_\_
- Print Name and Sign

**Thank You! We are looking forward to meeting you!**

Please email [admin@rootsandbranchesfs.com](mailto:admin@rootsandbranchesfs.com) your completed application form or drop off in person.

**Please complete Waiver and Questionnaires on Following pages. Thank-you!**



**Participant Agreement/Waiver  
Forest School**

**Description of risks:**

I am aware that there are inherent risks involved with outdoor wilderness activity and in my child's participation of any outdoor activity at the Connect The Dots, Roots & Branches Forest School Programming, including my child's use of any equipment. The risks and hazards of outdoor activity include, but are not limited to:

- Injuries from executing strenuous and demanding physical activities
- Injuries from failing to properly use tools such as carving knives
- Injuries resulting from matches or fire
- Contracting poison from plants
- The presence of ticks, bears, bobcats, lynx, coyotes, wolves, moose etc.

Furthermore, I am aware:

- That injuries sustained in outdoor activity can be severe and even fatal;
- That all rules verbally explained, and outlined are designed to enhance safety of my child and others and are to be followed at all times;
- That knife and carving work as well as fire and open fire cooking require special instruction and training from the facilitator;
- My child's risk of injury increases with fatigue

**Release:**

I release Connect The Dots, Roots & Branches Forest School Programming, its Directors, Facilitators, Teachers, Volunteers, and Members of all responsibility for any injury, loss, or damage which my child might sustain while participating in any Connect The Dots or Roots & Branches Forest School Activities.

**Acknowledgement:**

I acknowledge that I have read and fully understand this agreement, while accepting the risks involved with my child's participation in these activities at the Connect The Dots Centre or Roots & Branches Forest School programming at the Gorham Location or at The Baggage Arts Building or other community locations.

---

Signature of parent/guardian

---

Printed name(s) of child(ren) being registered

---

Printed name of Parent(s)/Guardian(s)

---

Date



**Please Complete The Following Parent Questionnaire and Waiver. All students attending must have this form completed prior to acceptance into the program.**

### **Parent Questionnaire**

Child's Name:

Parent's Name(s):

Child's DOB:

Home Address:

Referred by:

Email:

Today's Date:

Phone we can reach you at:

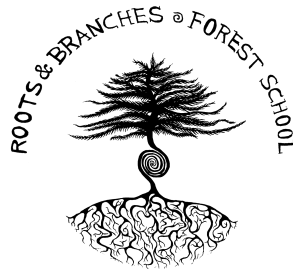
1) What do you wish your child to gain from taking part in an outdoor school and mindfulness program?

2) How often does your child spend in nature or outdoor play? Describe regular and/or favourite activities.

3) What is pleasurable for you regarding your child's personality?

4) What can be challenging for you regarding your child's personality?





5) Does your child have any siblings? If yes, what are their names and ages?

6) How do you and/or your family deal with discipline?

7) Are you comfortable with your child getting wet and/or dirty? [Please note: They will get wet and dirty!]

8) What fears might you have about nature?

9) What is something you would like or think I should know about your child?

10) Does your child have a difficult time separating from you and is this a concern for you?



11) How do you feel about your child using the 'bathroom' in mother nature?

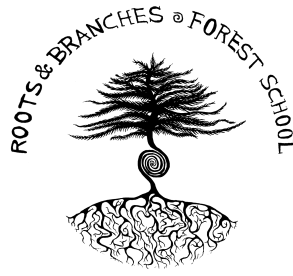
12) Could you describe your connection to nature?

13) Is your child receiving any form of counseling or services we should be aware of? [Please note:

We ask this with the utmost respect knowing that this awareness will assist us in creating safer and more accessible spaces for your child and that of their peers].

14) Are you willing to attend with your child if there are behaviours that need to be addressed?

15) Are you involved in any other community groups? If so, which ones and what is your involvement?



16) Does your family have a mindfulness or meditation practise? If so, what kinds of things do you do?

17) Are you willing to sign up to our SeeSaw Page (online current information page on what we do each week at forest school) and read the postings each week. Your awareness is vital to our program running smoothly.

18) Would you have interest in heading (planning and carrying out) a fundraising activity? If so, what ideas do you have? Our program needs your help to survive. We are almost meeting our costs and need some extra funds to help us continue!

Thank you for sharing with us. This information will be kept confidential while being used by authorized personnel to design program and interact with your child in a respectful, caring way.  
Start Date: