

2021-2022 STUDENT INFORMATION FORM

Student's Name:		Male Female
Street Address:	City:	Zip:
Home Phone:		
Student's Date of Birth:		
Parent's Name:		
Mom Cell:	Dad Cell:	
Parent's E-mail address:		
Church/Religious Affiliation:		
Curriculum or schooling program/philosophy	currently using/planning to use:	
Number of years you have homeschooled:		
Are you enrolled in any other programs? Whi	ch one(s) (i.e. Connections Academ	ny)
Grade level(s) your child is comfortable worki	ng at:	
Are there any mental, emotional, social, acad	lemic or medical issues of which we	should be aware? If so, please list.
Has your child ever been asked to meet with due to mental/behavioral issues? (if so please		
Allergies:		
Who has permission to pick up your child/ren	?	
Who does not have permission to pick up you	ur child/ren?	
Emergency Contact Information:		
Name:	Numbe	er:
Relationship to child/parent:		
Personal Reference we may contact – i.e. pa		
Name:	·	er:
Relationship to child/parent:		



RELEASE OF LIABILITY, CONDUCT AND CONSEQUENCES, HEALTH WAIVER & MEDIA RELEASE

RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in Inspire Homeschool Academy related events and activities, the undersigned:

- 1. Understands that we are not a licensed or accredited facility as it is not required by law in the state of Georgia.
- 2. Agree that the parent(s) and/or legal guardian(s) of the participant should inspect the facilities and equipment to be used, and if the parent or guardian believes anything is unsafe, he or she should immediately advise supervisor (advisor, manager, etc.) of such condition(s) and refuse to participate.
- 3. Acknowledge and fully understand that each member/participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inactions, or negligence but the action, inaction, and negligence of others, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
- 4. Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.
- 5. Release, waive, discharge and covenant not to sue Inspire Homeschool Academy LLC, Pleasant Grove Baptist Church, Sunset Hill Baptist Church, its affiliated clubs, their respective owners, administrators, directors, agents, staff and other employees, volunteers, or students of the organization, other members/participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors or premises used to conduct the event, all of which are hereinafter referred to as "releases," from any and all liability to each of the undersigned, his or her heirs and next of kin for any and all claims, demands, losses or damages on account of injury, including death and damage to property, caused or alleged to be caused in whole or in part by the negligence of the releases or otherwise.

CONDUCT and CONSEQUENSES

1st Offense – Teacher/Adult in charge will talk with the student about his/her misbehavior.

2nd Offense – Teacher/Adult in charge will talk with the student about his/her misbehavior. Inspire Leadership and parent will be notified.
 3rd Offense - Teacher/Adult in charge will talk with the student about his/her misbehavior. Inspire Leadership and parent will be notified. Leadership will speak/and or meet with the parent and student regarding the misbehavior and dismissal from the class/program could result.

Inspire is proud to say that we are NOT a zero-tolerance academy. We always look at a child's heart before making any decision on the actions or behaviors of a child.

I understand that intentionally or unintentionally causing disruption or preventing a participants ability to enjoy their experience or staff's and/or volunteer's ability to conduct a program or their job duties by either a child or a parent by the use of violence, threats, intimidation, unsafe conduct regarding children, fear, resistance, insults, or any other conduct, whether intentionally or unintentionally is not acceptable behavior, and is in conflict with Inspire Homeschool Academy values, and may result in termination from the program and future programs.

HEALTH WAIVER

I understand my child is engaging voluntarily in exercise, physical activity and /or recreational programs. It is my responsibility to monitor my /child's own condition throughout any activity or program and, should any unusual symptoms occur, I /my child will cease participation and inform the instructor/coach/director and staff of the symptoms. In the event that a medical clearance must be obtained prior to my child's participation in a physical activity program, I agree to consult my physician and obtain written permission from my physician prior to the start of any program. I agree to assume the natural risks associated with exercise, sports and physical activity

MEDIA RELEASE

I understand that events and classes may be videotaped and photographed, and I authorize the use and reproduction of any and all photographs or video footage including but not limited to print, video, the internet, and social media.

I HAVE READ THE ABOVE WAIVER AND RELEASE, U SIGN IT VOLUNTARILY.	INDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND
Name of Student/Participant (print)	
Signature of Parent/Guardian	Date



EMERGENCY INFORMATION FORM

(KEPT IN SEPARATE FILE TO TRAVEL WITH CHILD IN EVENT OF AN EMERGENCY)

Student's Name:					Male	Female
Street Address:		City:		Zip:		
Home Phone:						
Student's Date of Birth:		Student's Grad	de:			
Mom Cell:		Dad Cell:				
Emergency Contact Information						
Name:			Number:			
Relationship to child/parent:						
Medical and Insurance Information	า					
Insurance Company:			Identification #:_			
Primary Care Physician Name:			Phone	#: <u> </u>		
Known drug allergies and reaction:_						
Current Medications:						
Does your child suffer from any of the						
Require Epi-Pen If so, Ana	aphylaxis Action Plar	n <u>MUST</u> be filled ou	it and kept on file.			
Allergies E Fainting I Other	Bee Stings Poison Ivy/Oak	Insect	Bites	A:	sthma oods	
If the answer to the above is yes, kin Please list any other special informat						
Any student who might require mediathe following information.	cation while attending	an event or class sp	onsored by Inspire	Homeschool	Academ	y must supply
Name of medication:						
Reasons for taking medication:						
Date(s), time(s), and amount or dosa	ıge:					
I give permission for this medication	to be dispensed to my	child by an adult vo	lunteer or staff mer	nber. Y	es N	o
I give permission to dispense Tyleno	I (acetaminophen) and	d/or ibuprofen to my	child for pain or fev	er. Ye	es N	0
Medical Treatment and Release I understand that Inspire Homeschool Accoccur. In the event of an injury, accident, to be treated by certified emergency per- personnel such as nurses and laboratory Inspire Homeschool Academy LLC, its ov Baptist Church from any liability related to behalf of anyone with interest in my child.	ademy will take all reason illness or other emergend connel such as emergenc technicians. I agree to adviners, teachers, staff mero my child or myself partic	cy, and if myself or the by medical technicians, ccept financial respons mbers, volunteers, stu	above stated physicia emergency room phy sibility for the costs rela dents and Pleasant G	an cannot be re sicians and otl ated to this me rove Baptist Cl	eached, I a her emerge edical treat hurch, and	authorize my chi ency room ment. I release Sunset Hills
Parents Signature			 Date			





Anaphylaxis Emergency Action Plan – (ONLY required for students with EpiPens) Patient Name: Age: Allergies: □No Asthma Yes (high risk for severe reaction) Additional health problems besides anaphylaxis: ______ Concurrent medications: Symptoms of Anaphylaxis MOUTH itching, swelling of lips and/or tongue THROAT* itching, tightness/closure, hoarseness SKIN itching, hives, redness, swelling GUT vomiting, diarrhea, cramps LUNG* shortness of breath, cough, wheeze **HEART*** weak pulse, dizziness, passing out Only a few symptoms may be present. Severity of symptoms can change quickly. *Some symptoms can be life-threatening. ACT FAST! **Emergency Action Steps - DO NOT HESITATE TO GIVE EPINEPHRINE!** Adrenaclick (0.15 mg) 1. Inject epinephrine in thigh using (check one): Adrenaclick (0.3 mg) Auvi-Q (0.15 mg) Auvi-Q (0.3 mg) EpiPen Jr (0.15 mg) EpiPen (0.3 mg) Epinephrine Injection, USP Auto-injector- authorized generic (0.15 mg) \square (0.3 mg) Other (0.15 mg) Other (0.3 mg) Specify others: ___ Additional Notes: IMPORTANT: ASTHMA INHALERS AND/OR ANTIHISTAMINES CAN'T BE DEPENDED ON IN ANAPHYLAXIS. 2. Call 911 or rescue squad (before calling contact) 3. Emergency contact #1: home work cell Emergency contact #2: home work cell

Parent's Signature (for individuals under age 18 yrs.)

Date

This information is for general purposes and is not intended to replace the advice of a qualified health professional. For more information

PROGRAM TUITION AND FEES INFORMATION 2021–2022



OPEN REGISTRATION POLICY

Early Registration for Inspire Homeschool Academy usually begins mid-January for the upcoming school year. There is a discount on registration fees for those who register on or before May 1st. Early registration is \$75, late registration is \$150. Slots for classes such as music lessons are filled in a first-come basis; register early to secure your lesson slot. **Paid registration and supply fees secure your spot.**

PARENT RESPONSIBILTY

Parents are the ones primarily responsible for their child's education. The teachers at Inspire Homeschool Academy are a partner in the education process and the classes are meant to compliment the homeschool program being taught at home. Parents are responsible to make sure the student completes any work given by the Inspire teacher. Inspire is not meant to be the child's sole source of education.

Parents are responsible for filling out the annual Declaration of Intent with the State of Georgia as well as keeping their own attendance. Inspire is not responsible for filling out DOI's for families.

Please note: If your child/children are enrolled in K-12, Georgia Cyber Academy or Georgia Connections Academy your child/children are <u>NOT considered home school students</u>. These are state board approved <u>PUBLIC</u> on-line charter schools and your child is considered a public-school student.

(https://www.gadoe.org/Curriculum-Instruction-and-Assessment/Pages/Home-Schools.aspx)

Students from these types of programs will only be accepted at Inspire on an individual, case by case basis.

TUITION

Monthly tuition is based upon a YEARLY CLASS FEE divided by 9 MONTHLY PAYMENTS. Monthly payments are only offered for convenience of the families. 30 day notice must be given to drop a class for any reason. Once tuition has billed out by SmartTuition for that month, that tuition is considered due, even if the class is not attended.

Class Type	Yearly Fee	Broken down by month
Classic or Extra-Curricular Type Classes	\$450	\$50
Music Lessons and Voice Lessons	\$675	\$75

PAYMENT TERMS

Regular tuition payments are paid through Smart Tuition. Invoices are emailed to parents on or about the 10th of the month; tuition is due on the 1st of the following month. **There** <u>is no grace-period</u>. Smart-Tuition offers 20 different options to pay including online, by credit card, or monthly automatic debit. Smart Tuition options are available 24/7 to take payments.

LATE FEES

Late fee of \$40 are assessed by Smart Tuition on the balance owed. Unpaid late fees/tuition from one month will carry over to the next month.

REFUNDS

Registration and supplies are non-refundable and non-transferable.

BOOKS AND SUPPLIES

Parents are responsible for obtaining and paying for all books and supplies necessary for the class, unless otherwise included in class fees. Some classes will have a minimum requirement needed for technology or software; parents are expected to provide this.

SPECIAL NEEDS/DISCIPLINARY ISSUES

While students of many abilities attend Inspire Homeschool Academy, from those who are profoundly gifted, to those students with very minor learning disabilities such as dyslexia – we <u>do not</u>, however, have the special staff certification or teaching resources necessary to provide for the needs and nurturing of students with severe learning disabilities, certain mental disorders, or disciplinary problems. We do know a vast array of resources and are always happy to refer you to programs that will best benefit the needs of your child.



Student's Name:		Ci	LASS CHOICE FORM
Student's age as of Sept 1st 2021-2022:		2021-2022 schoo	l year:
CIRCLE LOCATION and DAY CHOICE	HIRAM-TUESDY		/ILLE - THURSDAY
Monthly tuition is based upon a <u>YEARLY CLASS FEE</u> di Class Choice, Class Monthly Fee, and Class Suppl		NTS. See website or c	lass supply list for supply fees.
Class Name		Monthly Fee	Supply Fee (if applicable)
1	9:00am	\$	\$
2	10:00am	\$	\$
3	11:00am	\$	<u> </u>
Lunch	12:00pm	N/C	N/C
4	1:00pm	\$	\$
5	2:00pm	\$	\$\$
6	3:00pm	\$	\$
	TOTALS	\$	\$
DUE EACH SCHOOL YEAR UPON ENTRANCE TO THE PL	<u> </u>		ES YOUR CLASS PLACEMENT lete until these fees are paid.
ANNUAL REGISTRATION FEE	(\$150 LATE registrati	on <u>after</u> May 1 st)	\$75 EARLY-Registration
SUPPLY FEE TOTAL (from above)			\$
TOTAL of NON- REFUNDABLE REGISTRATION FEES an	d SUPPLY FEES – Due at Regis	tration	\$
TOTAL TUITION DUE MONTHLY (First Tuition Payment Due in Sept)		\$	
Please make your check payable to Inspire Homescho	ool Academy.		
We retain the right of refusal for enrollment of any c	hild. If enrollment is denied, a	ll fees will be fully re	efunded.
I understand that most classes will require a minimum worked out for my child's benefit, I will be entitled to a (and fees returned).		_	=
Deliberately providing false or misleading information issues may be grounds for immediate dismissal without		ication of pertinent	medical/mental/behavioral
I understand I am committing and agree to pay the for program or not. Tuition, registration, and supplies ar			nether my child finishes the

PLEASE RETURN ALL ENROLLMENT FORMS TO



Did you in	clude:
	Fill out ALL 4 Registration Forms udent Information, Emergency Information, Release of Liability, Class Choice Form)
A	Anaphylaxis form (only if student requires and EpiPen)
F	Registration Fees
	Supply Fees
	Smart Tuition Form (if not already enrolled in ST through Inspire)

Please make registration checks payable to **Inspire Homeschool Academy**. Zelle payments, Paypal, Visa, Mastercard, American Express are also accepted.

Mailing Address:

Inspire Homeschool Academy C/O Rosemary Giordano 860 Hickory Gap Trail Dallas, GA 30157

Or scan and email and we will send you an invoice for fees: inspirehsa@gmail.com

Please note: We are not affiliated with the church and <u>do not</u> maintain an office at the church. Please call or email to set up an appointment or to drop off paperwork.

Phone number: 678-675-7240 (please leave message if no answer)

Email: inspirehsa@gmail.com

Web Address: www.inspirehomeschoolacademy.com

Facebook: https://www.facebook.com/inspirehomeschoolacademy