



Deeper Root Academy

"Sustaining Life For Our Tomorrow"

8001 Silver Star Road Orlando, FL 32818

Enrollment Application for Siblings

Dear Parent/Guardian:

We are pleased that you have chosen Deeper Root Academy for your child. Please complete all of the information requested in this application packet. The checklist below is provided for your convenience. Upon receipt of all items, including recommendation letters, the Admissions Team will review to determine admittance into the program. You will be notified via email once a determination has been made.

Please be sure the following forms have been completed:

- ☐ Enrollment Application
- ☐ Recommendation Letters
- ☐ Submitted Birth Certificate and Shot Records

In addition, you will need to have:

- ☐ \$100.00 New Student Application Fee Non-Refundable
- ☐ \$100.00 Annual Enrollment Fee Non-Refundable
- ☐ Activity Fee (*if accepted*)

If you have questions about any of these items, please contact the academy.

484-321-6957

admissions@deeperrootacademy.org

www.deeperrootacademy.org

Today's date _____

Child's Name _____ Date of Birth _____

Grade Level child is entering: _____

Program Fees

New Student Application Fee Non-Refundable.....\$100

Annual Enrollment Fee Non-Refundable.....\$100

2023-2024 Fee Schedule:

Infant/Toddler (6 weeks – 1 yr.)	Toddler (2yrs.)	Preschool (3yrs.)	VPK thru 8th
Registration \$100.00 Non-Refundable	Registration \$100.00 Non-Refundable	Registration \$100.00 Non-Refundable	Registration \$100.00 Non-Refundable
Tuition \$12,000	Tuition \$10,320	Tuition \$9,360	Tuition \$8,500

2023-2024 Annual Activity Fees Non-Refundable

Infant/Toddler - 1 yr. \$140.00	Toddler (2yr) \$140.00	Preschool (3 yrs) \$170.00	VPK thru 2nd \$227.00	3rd thru 8th \$287.00
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• Before School Care - \$15/wk After School Enrichment Program - \$60/wk

Please review the program fees with the Director. It is important that you understand the program and the fees that apply. You are responsible for late fees if your child is at the center past 6:00 pm. See Parent Handbook for details. (posted online)

For Office Use Only:

Start Date: _____ Certificate#: _____

Receipt #

Reg. Fee/ 1st week/ Tuition Advance State/F.Aid/Private Approved By Handbook

CHILD INFORMATION

Please Print Neatly

Child's Name _____ Date of Birth _____ Sex: M ___ F ___

Home Address _____ Apt # _____ City _____ State _____ Zip _____

Child's Home Phone _____ Child resides with: _____

Name of sibling (s) who attend D.R.A. : _____ **Date of Birth:** _____ **Gender:** M ___ F ___

Previous School Attended: _____

Address: _____

Phone: _____ **Email:** _____

Ethnic Origin (Optional): For statistical purposes only:

Asian _____ African-American _____ Caucasian _____ Native American or Alaskan _____

Native Hawaiian or Pacific Islander _____ Hispanic or Latino _____ Other _____

PARENT/GUARDIAN INFORMATION

1st Parent/Guardian's Name _____ Relationship to child: _____

Home phone: (____) _____ Cell: (____) _____

Email: _____ Home address if different from above: _____

2nd Parent/Guardian's Name _____ Relationship to child: _____

Home phone: (____) _____ Cell: (____) _____

Email: _____ Home address if different from above: _____

MEDICAL HEALTH INFORMATION

Name of Child _____ Date of Birth _____ Sex ____M ____ F

Allergies: _____

What to do if there is an allergic reaction: _____

Daily Medications*

Name of Medication Dosage

_____	_____
_____	_____
_____	_____

**NO Medications will be dispensed by the Academy Staff. Please make arrangements to administer your child’s medication before or after school. If there are special circumstances, please communicate this to the school director.*

Social/Emotional history:

Please tell us if there have been any recent changes such as moving to a new place of residence, change in family make-up, or recent family death. Please tell us if your child has been in counseling and for what reason.



Please mail and/or deliver your completed **application, registration fee,** and **required documentation** to the address below.

ATTN: DRA Admissions
Deeper Root Academy
8001 Silver Star Road
Orlando, FL 32818

*** The Recommendation Letter request will be sent to the previous school once this application is received. ***

Only completed applications will be considered.