Pilares de Esperanza Language and Vocational Institute

This agreement is made for the specific intent of transferring a student to Pilares de Esperanza from a similar school. Students must first have met the following requirements in order to qualify to be transferred to Pillars de Esperanza:

1- Student has achieved Status Level 2 with a minimum of 400 merits (pts).
2- Student must first be enrolled in a similar school for a **minimum** of three months.
3- Student must have successfully graduated Orientation Seminar.
4- Student must be recommended to Pillars de Esperanza by the similar school.

If needed, a passport can be obtained while the student is qualifying to transfer. Any class work and merits from his/her success program will transfer with him/her to POHLVI of Costa Rica after meeting the requirements to transfer to Costa Rica. If at any time students choose by their actions or preference to leave Costa Rica, or are expelled from the school, parents/sponsors may choose to re-enroll their student at their previous school.

Once the student has qualified to transfer and has a passport, she/he will be transferred to Pilares de Esperanza. There is a four hundred ninety five dollar U.S.($495.00) transfer transportation fee that can be paid along with the student monthly fee at www.pillarsofhope.com. The transfer fee will cover costs for obtaining a passport (if needed) and the escort from the school to the airport. This transfer fee does not cover round-trip airfare from the similar school to Costa Rica. Booking round-trip airfare is the responsibility of the Sponsor. Special pricing for these travel arrangements can generally be obtained by contacting Oasis Travel at 1-435-628-1712. After transferring to Costa Rica, sponsors will be billed for the following tuition and fees schedule starting:

Monthly Tuition ($1,595) plus monthly student fees ($195) $1,790.00

(*Pillars of Hope monthly tuition is one thousand five hundred ninety five dollars U.S. ($1,595), which will be billed by Optimum Billing for each month that the student is enrolled at Pillars of Hope Language & Vocational Institute in Costa Rica. Any additional charges for PC rental, special programs fees such as the Equestrian ($195/month), Yachting and Oceanography ($295/month) programs, and any medical, transportation and escort fees, etc., as described in the Enrollment Agreement will be billed monthly along with the standard fees described above by Pillars of Hope itself.*

Parent Checklist

Please understand that the School will not accept any students unless the following items accompany or precede the student.

1. Original Contract must accompany or precede the student to the School.
2. Certified Birth Certificate and Passport.
3. Immunizations up to date and immunization records: _____DPT _____TB, _____ Hepatitis B (all up to date)
4. Medical/psychological records (recommended)
5. For students under the age of 18 years with divorced parents, legal custody papers must be provided prior to arrival. If both Biological parents are signing, no custody verification is necessary. Both Biological parents, if known, must sign contract, regardless of custodial responsibilities.
6. Copy of insurance card front and back.
7. Copy of student's Social Security Card
8. Copy of any professional evaluations or court proceedings (psychological, academic…)
9. Official academic transcripts in sealed envelope and educational history.
10. Items to bring list, purchased and checked off as packed in student luggage.
11. Student signed copy of Pillars of Hope Institute Honor Code.

Signature_____

***This sheet needs to be signed by sponsors and returned with the enrollment agreement.

Transfer Agreement

_____
Initials

POWER OF ATTORNEY / (PODER ESPECIAL)

I the father, (*Yo, el padre*) _____with the ID number, (*con número de identificación*)_____, and the mother (*y la madre*) _____, with ID number (*con número de identificación*) _____, in exercise of the Patria Potestad of the minor (*en ejercicio de la Patria Potestad del menor*) _____,
we give full Individual Power of Attorney to (*conferimos poder especial individual a*):

1) **PILARES DE ESPERANZA, S.A.**, ID number (*con cédula jurídica número*) 3-101-297584,
2) Dr. Harold A. O. Dabel, with ID number (*con cédula número***) 057099840 (USA Passport)**
3) Lic. Francisco Bustos A., with ID number ***(con cédula número)*** **7-689-963,**

In order that in the name of the student do all acts of guard, breed and education of our son or daughter, represent him or her in all acts or process, sign in representation of the student all requirement to fulfill the immigration requests during his or her stay in Costa Rica. (*A fin de que en nombre y representación del menor ejerzan todos los actos de guardia, crianza y educación de nuestro hijo o hija, lo representen en todo acto o procedimiento y suscriba en representación del menor todos los requerimientos migratorios que se requieran durante su estadía en Costa Rica*.)

For these purposes the representative can take without any consultation, all the decisions that are considered needed. In all cases, the representative can substitute his power, all or in part, and the substitution does not eliminate the proxy here by given. (*Para tal fin el representante puede tomar sin consultar todas las decisiones que se requieran. En todo caso el representante puede sustituir su poder en todo o en parte, sin que la sustitución elimine el poder aquí conferido*).

We sign on the day (*Firmamos el día*) _____, of the month (*del mes de*) _____, of the year (*del año)* _____.

_____ _____
Father (*Padre*) Mother (*Madre*)

_____
Initials

PILARES DE ESPERANZA
ENROLLMENT AGREEMENT

THIS ENROLLMENT AGREEMENT, by and between Pilares de Esperanza Institute, a College Preparatory, Language and Vocational Boarding School for Teens who work best in a positively structured environment in Orotina, Costa Rica (hereinafter "the School"), and _____ _____ (hereinafter the "Sponsors"), is made in consideration of the following mutual promises and covenants of the parties set forth in this Agreement:

1. SPONSORS. The Sponsors affirm that they are the legal guardian (having both legal and physical custody) of _____,(hereinafter the "student"), whose birth date is_____, 19_____, and/or that Sponsors expressly desire to contract for enrollment of the student in the School according to the terms of this Agreement.

2. ENROLLMENT. The Sponsors acknowledge that they have had the opportunity to have any of their questions answered by representatives of the School. Sponsors hereby enroll the student and upon the completion of this Agreement and acceptance by the School; the School promises under the conditions and limitations specified in this agreement, i.e. Items 1-39 to undertake and provide the following services:

    a. Academic Curriculum;
    b. Room and Board;
    c. Structured Environment;
    d. Supervision;
    e. Success Enhancement Courses

    Sponsors understand that Pilares de Esperanza Institute is a **Language and Vocational Boarding School**, where, in addition to an academic curriculum, students also receive educational opportunities in success enhancement and personal development. Pilares de Esperanza is not a treatment facility or a rehabilitation center. The School provides daily peer review and feedback sessions. Additional independent counseling sessions may be acquired at the discretion of the Sponsors and at their own expense.

    Sponsors understand and agree that the School will make changes in staffing, School content, and services at its sole discretion. Therefore, the School does not accept responsibility for services written in sales material or brochures as such materials may be outdated or may become outdated as changes occur during the admittance period. The School also does not accept responsibility for any services represented orally by any of its School staff or public relations personnel; as any perceived oral representations can be a result of an honest misunderstanding. **It is further understood and agreed that the School only takes responsibility for the services written in this agreement under the conditions and limits specified in Items 1-39.** The Sponsors also understand and agree that the School makes no promise in terms of outcome or results.

The Sponsors understand that Pilares de Esperanza is not recommended for students that are suicidal, psychotic, violent, combative, schizophrenic, highly depressed, and/or have significant mental/emotional problems, drug addiction, or traumatic brain injury. The School is also not equipped or recommended for students with health related disabilities or illness of a disabling character such as, diabetes or physical handicaps that limit normal activity or exercise. The School does not provide any clinical screening for these items and it is agreed that the Sponsors are responsible to properly screen these items before admission. The sponsors hereby release and hold harmless the School for problems, liabilities, or damages that arise due to the student possessing these types of problems.

Sponsors understand and agree that the school **"Pilares de Esperanza" has sole responsibility for the performance of this contract and the general care and well being of the student**. Therefore, the **Sponsors agree to hold harmless and release from liability or damages any person or persons, agency, organization, or program that has referred the Sponsor to Pilares de Esperanza**. **Sponsor further agrees to hold harmless and release from liability or damages any person or persons, organization, or businesses that provide contract services to the School**. The Sponsors understand and agree that "Pilares de Esperanza" takes sole responsibility for the performance of this contract and the general care and well being of the student.

3. CONTRACT PERIOD. This agreement is for a minimum period of 12 months; beginning _____ of the year 20_____ tuition rate of One Thousand Five Hundred Ninety Five ($1,595.00) dollars paid in advance and due each month on the same day of the month as the student was enrolled. There is also a total discount of $1,000.00 when tuition payments for the twelve months or more are made at the time of enrollment and the student is enrolled for the entire 12 months. If the student is not enrolled for the entire 12 months, the sponsors are obligated to give the school a ninety day notice (see section 34) and the 12 month discount will be forfeited during the 90 day notice period.

4. SPONSORS' CONSENT TO STUDENT'S PARTICIPATION IN ENTIRE SCHOOL. Sponsors give their consent for the student to participate in all areas of the School and activities of the School, including, but not limited to, activities, work assignments, fitness programs, internships, and field trips.

5. CASH-IN-ADVANCE PAYMENT PLAN: Regular monthly tuition is one thousand five hundred ninety five U.S. dollars ($1,595.00). There is a special cash in-advance discount of one thousand ($1,000.00) dollars offered to the Sponsors of Hope Scholars, arranged by the School, and is utilized when the 12 month tuition payment is paid in advance; all payments of monthly student fees ($195) are made on a timely basis, and when there is not a third party payer or resource for the parents or sponsors (i.e. insurance, special funding, etc.).

TUITION. The Sponsors agree to pay the School upon admission (Non-refundable) the tuition rate of **$4,5400.00** dollars U.S., which includes the first month tuition of $1,595.00 U.S. dollars, a one time processing fee of $2,500.00 US dollars, the first month student fees of $195.00 U.S. dollars (which includes: Incidentals fee, Activities Fee of $75.00, Computer Access Fee of $25.00, and the Activity Shirt Rental/ Laundry, Ironing Fee of $95.00), and a $250 U.S. dollar medical deposit that is required for a medical debit account to be accessed as needed for a mandatory entry physical, medical, dental or other medical related transportation, escort, and care.

STUDENT FEES & MEDICAL DEPOSIT. Monthly payments for student fees of one hundred ninety five dollars U.S. ($195) and a one-time medical deposit of two hundred fifty dollars U.S.($250) must be paid to the School through their Online Billing Service and Billing Company

(Optimum Billing) Online Billing can be accessed on a secured website at: www.pillarsofhope.com. Any extra costs for services not included in the items listed above (i.e. Laptop Rental) can also be paid at online. These payments are due on the same day of the month as the student was enrolled.

The fees schedule remains as stated above throughout the entire course of the student's enrollment in the School. Monthly payments do not adjust to the student's status in the School, nor the services offered. The monthly payments do not reflect the exact number of days the student will be or is in residence at the School in any given month. THERE ARE NO FEE ADJUSTMENTS OR REDUCTIONS FOR PERIODS FOR WHICH THE STUDENT IS NOT PHYSICALLY PRESENT AT THE SCHOOL, whether or not either the Sponsors or the School authorizes the Student's absences.

Personal costs and expenses not covered in monthly tuition and fees schedule will be billed monthly in addition to the monthly payments stated above (see Item #6 of the Enrollment Agreement).

Sponsors hereby give representatives of the School permission to conduct a routine credit check.

6. PERSONAL COSTS AND EXPENSES **NOT COVERED** IN MONTHLY TUITION AND FEES.

In addition to monthly tuition and fees, the Sponsor's agree to pay for the following expenses incurred by the student. Such expenses will be billed to the Sponsors monthly as they occur:

(A). Medical, dental, orthodontic, optical, urinalysis, medications, lab work, etc. **Pilares de Esperanza requires a comprehensive physical exam and a dental exam of all students upon arrival.**

Please note: A separate cost in the amount of two hundred fifty dollars ($250) is required for Medical Debit Account (as stated under section 5) made payable to Pilares de Esperanza. **All students who stay in the country for more than 90 days are required to have *a student visa* from Costa Rica Immigrations, which will cost $150 plus the cost for transportation and escort services**.

(B). Transportation and escort service to or from the School for any reason outside of normal activities

(C). Haircuts (Boys: $10.00, Girls: $15.00 per haircut); Permanents and colors are based on local costs and made available only to students who have written permission from legal guardians.

(D). Postage ($1.00 per standard letter)

(E). All phone calls from the student or the School

(F). Supervision and Transportation costs for special needs or activities that are separate from the regular School (i.e., doctor and dental appointments, travel to and from airports); Transportation with escort service from San Jose is $250. Transportation and escort service to appointment in Orotina is $50.00. The cost for transporting more than one youth will be equally divided between the students escorted in the same vehicle

(G). All students on medication prescribed by a psychiatrist, require additional ongoing Doctor reviews, which results in a cost to the Sponsors of $100.00 for a simple medication review to $150.00 for an involved patient understanding and motivational review every 90 days.

(H). Daily On Course Review sessions held with the school counselor along with the registration cost of the Parent-Child Teacher (PCT) Conferences and seminars, excluding travel, hotel and restaurant charges, are included in the amount billed monthly for tuition. However, the School services do not include any formal individual therapy sessions with a licensed therapist in Costa Rica. External individual therapy or counseling sessions, while usually not needed or recommended, can be obtained for $100.00 to $150.00 per session plus the cost of transportation and escort services. If the session is scheduled with a psychiatrist the cost will be $150.00.

(I). Other expenses related to the well being or needs of the student not otherwise provided in accordance with this agreement.

7. UNUSUAL COSTS

Responsibility for damage to or loss of property caused by the student. Sponsors agree to be financially responsible for the costs of repairing or replacing any property lost, stolen, damaged, defaced, or destroyed by their student that are not covered by insurance. These costs include those costs incurred to replace damaged or torn uniforms or repair or replacement of leased laptop computers. Such costs will be billed to the Sponsors at the time such damages or loss occurs and must be paid by the Sponsors within fifteen (15) days of receipt of the bill.

Expenses for assistance in the return of a student absent without authorization. In the event that the student leaves Pilares de Esperanza without authorization, Pilares de Esperanza will use reasonable efforts at the request of the Sponsors to assist the Sponsors in finding the student and in assuring their safe return. An accounting of the expenses incurred by Pilares de Esperanza while assisting the Sponsors in finding and returning the student will be made to the Sponsors. SPONSORS WILL BE RESPONSIBLE FOR SUCH EXPENSES. Sponsors also understand and agree to be responsible for any damages to the community or its citizens caused by the child during the unauthorized absence.

Cost of collections, attorney fees, and interest. Sponsors agree to pay the costs of collection of any amounts due under this agreement, including reasonable attorneys' fees, whether or not legal action is commenced and in addition to pay all penalties plus interest (1½ percent per month) on all sums not paid within five (5) days after the due date.

8. INSURANCE. The Sponsors shall provide health insurance coverage for the student during the initial or any extended Enrollment Period. A copy of the health insurance policy must be provided to the School at least seven (7) days prior to the student's arrival at the School, and it shall be the Sponsors' responsibility to maintain the health insurance policy in full force and effect during the initial or extended enrollment period. In the event any health insurance policy is terminated for any reason or new coverage is obtained, the Sponsors shall notify the School immediately and furnish a copy of the policy. In the event the School learns that there is no health insurance coverage of a student for any reason, the School may, but is not required to,

obtain an appropriate health insurance policy at the Sponsor's expense for the student. Whether or not the School obtains a health insurance policy, the School may return the student to the Sponsors' custody at the Sponsors' expense.

9. SUPERVISION. Sponsors understand that the amount of supervision varies with each student depending on the student's current status. The School provides a high level of supervision but it is understood that the supervision provided, regardless of status, does not guarantee that serious or minor accidents, injuries, self harm, harm from others, fighting, acts of physical aggression, runaways, suicide attempts, sexual activity/stimulation or use of alcohol, tobacco or other harmful substances cannot happen. These risks are present in any segment of society no matter how closely supervised or protected. The Sponsor understands these risks, and agrees to hold harmless, and release the School, and its staff, from all liability or damages associated with these areas.

10. EDUCATIONAL SEMINARS CONFERENCES AND WORKSHOPS. Pilares de Esperanza provides a number of educational and motivational seminars, conferences and workshops designed to enhance the full communicative development of the child and his or her relationship with others. The Sponsor understands and agrees that Pilares de Esperanza, at its sole discretion or need, may at any time change the amount of seminars, conferences or workshops provided for the student or the family. This includes changes, reductions, suspensions, or elimination of any seminars, conferences or workshops provided for the student or the family. Seminars and workshops are only available to the student and the student's family as long as the student is currently enrolled at the school.

11. ACADEMICS. The Sponsor understands and agrees that while the School provides a Self-learning Study system that might allow the student to accelerate their academic achievement; the School does not award credit for mere time in class, but only for work completed and competency demonstrated. Therefore, the Sponsors understand and agree that the School cannot ensure, nor be liable, for how quickly the student will receive credits, or that the student will receive academic credit (High School credits leading toward a High School diploma) in any certain subject, or that the student will receive these credits on any kind of accelerated basis, or that the student will receive any credits at all. Sponsors also understand that since Pilares de Esperanza is a private school and the academic courses are part of an Independent Study Program with high standards, all of the teachers/tutors working with the students may not need or have the same credentials as a public school teacher. The Sponsors further understand that any specialized or individualized tutoring, if available, may result in additional costs or charges to the Sponsor (Any such tutoring would be approved by the Sponsors in advance). Sponsors understand that the ultimate acceptance of any credits is the prerogative of each individual school district to which the student applies. Therefore, the School cannot ensure that any High School credit awarded will be accepted by any specific school district to which the student transfers. In like manner, Pilares de Esperanza cannot guarantee that all credits will transfer to this institution. Sponsors understand this and agree to hold harmless and release the School from any liability or damages concerning academic credits. Sponsors understand that the ultimate acceptance of any course work, credit or diploma is the prerogative of each individual school district, college or university.

12. MEDICATION. The Sponsor understands that all medication is self administered by the student under the general supervision of non-medical staff member. The Sponsors further

understand, because of the difficulty and logistics involved with medications, it is possible that there may be times the Student may not have access to medications for certain periods of time. The Sponsors understand that because all medication is essentially self-administered, problems or mistakes are possible. For these reasons, enrollment in Pilares de Esperanza is not recommended in cases where medications are paramount to the student's physical, mental, or emotional well-being. Therefore the Sponsors understand these risks and agree to hold harmless and release "Pilares de Esperanza" and its staff, from all liability or damages associated with medications.

13. MEDICAL INTERVENTION. The Sponsors understand that the School staff make numerous decisions about when to seek medical/dental help for students ranging from small to serious ailments, injuries, or needs. The Staff make decisions taking into consideration a balance between added costs to the parent for medical care, and true medical need of the Student. The Sponsors therefore understand that the School staff, like any parent, can miscalculate the timing or need of medical intervention. Such miscalculations can result in the student not getting medical intervention as soon as would be recommended or to avoid complications. It is understood that the School Staff make these "judgment calls" in a good faith effort for and in behalf of the parents. Any such "judgment calls" are subject to human error, especially since many of these judgment calls would have to be made by non-medical staff. It is hereby agreed that the sponsors will hold harmless and release the School and/or its staff from any liability for any illness, complications or damages occurring to the student because of a miscalculated "judgment call" made by the School or its staff in terms of the need or timing of medical intervention for the student. It is also understood and agreed that the School makes no representation and accepts no liability for the performance of any physician, dentist, clinic, or hospital to which the student is delivered for medical intervention. It is further understood that Costa Rican Health Care Professionals may not have the same technology or quality of medical or dental care to which one may be accustomed in the United States. The Sponsors understand these risks and agree to hold harmless and release Pilares de Esperanza and its staff from all liability associated with medical care.

14. UNAUTHORIZED ACTIONS OF EMPLOYEES. The Sponsors understand and agree that the School can only be responsible and/or liable for their employees to the degree that the employees operate within the scope of their employment, training and outlined job responsibilities. The Sponsors therefore agree to hold harmless and release the School from all liability or damages for any actions of the School staff or employees that are outside the training they have received or the scope of their constituted responsibilities or realm of their employment. This includes, but is not limited to, any inappropriate or unauthorized interaction between staff and students, as well as any type of illegal or criminal acts. This release does not relinquish the staff member from their individual liability for damages and/or prosecution for their actions outside of their constituted job duties or realm of employment.

15. TRANSPORTATION. The Sponsors understand that there is some transportation and that the risk of vehicle failure and/or the risk of traffic or airline accidents is always present. The Sponsor agrees to hold harmless and release the School from any liability or damages for such accidents or failures and from which any injuries may result. Sponsors give the School permission to transport the student as determined by the School.

16. RESPONSIBILITY FOR STUDENT'S PROPERTY. Each student shall be solely responsible for the care of their own property. The Sponsor agrees that the School shall not be responsible or liable for loss, damage, neglect, misplacement, or theft of the student's property regardless of how it occurred. The Sponsor agrees that the School is not responsible or liable for items left behind on visits, leaves, or when the student exits the School. The Sponsor understands that the School recommends that only minimal belongings are brought to the School and that expensive or sentimental items be left at home and that they are left at the School only at the sole risk of the student or Sponsors. The Sponsors agree to hold harmless and release the School from any liability or damages for the student's property.

17. RESPONSIBILITY FOR INJURIES, ACCIDENTS, OR ILLNESSES. Many of the activities in which the student may participate involve some risk. These risks include, but are not limited, to such activities as transportation, swimming, snorkeling, water sports, and recreational activities. There is also some inherent risks of illness, including, but not limited to, illnesses that are contagious; illnesses or health risks that are common to the geographic location, including but not limited to mosquito bites, sores, infections, slow-healing cuts, rashes; illness connected to food services, etc. There is also risk of hurricanes, earthquakes, acts of nature, etc. The Sponsor agrees to hold harmless and release the School, and its staff, from all liability for any injuries, illnesses, or other damages occurring to the student during enrollment in the School whether on or off the property.

18. STAFFING. As stated earlier, Pilares de Esperanza is not a treatment or rehabilitation facility. Therefore, Sponsors understand that staff members are hired not necessarily by credentials but to provide supervision and carry out the structured environment designed to benefit students at Pilares de Esperanza.

19. AUTHORITY TO ACT. Pilares de Esperanza may perform any and all acts necessary as determined in their judgment, or the judgment of each of them severally, for the health, welfare, and progress, of the student, including but not limited to (decisions in your place and stead), obtaining passport and entry visa, consent for hospitalization and/or consent for medical treatment, assistance and medical aid, psychological examination and assistance, of whatever nature, including surgery of any kind. The School may also authorize the student to receive urinalysis, blood tests, or other lab work as it deems appropriate.

20. AUTHORIZATION FOR SEARCH. Sponsors hereby give consent and authorize the School to search the personal effects and person of the student. The School is hereby authorized to confiscate any and all items deemed, by the School, to be contraband. The School will dispose of all contraband items. The Sponsor understands and agrees that the School will not be responsible for the care or return of confiscated items.

21. AUTHORIZATION FOR DRUG SCREENING. Sponsors and student hereby give consent and authorize the School to administer to the child a routine urinalysis or blood test for drugs. The Sponsors agree to pay for such expenses.

Date: _____ Signatures of Sponsors _____

_____

Date: _____ Student Signature _____

22. AUTHORIZATION FOR STRUCTURED ENVIRONMENT. The Sponsors understand and authorize the School to maintain a strict code of conduct including rules on dress, hair cuts and grooming, interaction with others, language, use of manners, appropriate attitudes and actions. Corrections for Rule Violations include but are not limited to loss of credits, loss of privileges, loss of status, essays, work hours, and work sheet assignments to encourage the student to reflect upon his or her behavior. The Sponsors further understand and authorize the School to suspend the student from their regular schedule and activities, including school classes, until they complete any necessary essays, worksheets and/or other disciplinary assignments. The Sponsors also understand and authorize that all essays and worksheets are completed in a designated area within the facility where students have minimal distractions and interaction with peers until they complete their worksheets or essays. The Sponsors authorize the School to apply the Rules and Corrections described here-in and any others deemed by the School to be necessary.

23. AUTHORIZATION FOR REWARDS AND INCENTIVES. The Sponsors understand and authorize the School to provide rewards and incentives to motivate the students. Rewards and incentives include but are not limited to earning Hope credits, privileges, trust, and status advancements. The Sponsors authorize the School to apply the Rewards and Incentives described here-in and any others deemed by the School to be necessary.

24. AUTHORIZATION FOR STUDENT LEADERSHIP PROGRAM. Student Leadership includes the student functioning as a Hope Buddy, Assistant Coach, Team Captain/Co-captain, Student Officer and Student Council member. We have found these opportunities for Student Leadership to be a very effective part of the overall development of the students as they learn and grow in leadership skills. The Sponsors and student hereby acknowledge that they understand and authorize the Student Leadership Program as designed by the School.

25. AUTHORIZATION FOR INTERVENTION. If the student is a safety concern to themselves or others, the Sponsors authorize the School to place the student in a room or area away from the interaction of others, where the student will remain under the close observation and supervision of a staff member until such time that the staff member feels the student is no longer a significant danger to himself/herself or others. The Sponsors understand that all such decisions are judgment calls and are open to human or judgment error. Sponsors agree to hold harmless and release the School from any liability or damages resulting from any decisions to place or remove the student from Intervention. During the Intervention period, the Sponsors authorize the staff to take all safety precautions within the training guidelines and according to Costa Rica legislation protecting self, private property and the rights of the child as deemed necessary.

26. AUTHORIZATION FOR PHYSICAL INTERVENTION. Sponsors hereby give consent and authorization to the School personnel to physically intervene, control and detain the student for and including, but not limited to, the following purposes: To prevent the student from jeopardizing the safety of self or others, to prevent the flight of the student into a dangerous or unsupervised situation, or to prevent the destruction of property. The Sponsor authorizes the School to use non-violent crisis intervention techniques to insure a safe, positive environment for each student. Sponsors agree to hold harmless and release the School from any liability or damages resulting from physical intervention procedures.

27. LIVING ARRANGEMENTS. Students live in on-campus dormitories supervised by dorm parents and dorm parent assistants.

28. THE SCHOOL OPERATES AS AGENT FOR SPONSOR. The Sponsors hereby agree that the School and its staff operate in behalf of, and as agents for, the Sponsors. The Sponsors affirm they are the legal guardian and have physical custody of the student. Any restrictions or suspension of the student's privileges or rights as outlined and authorized in this Enrollment Agreement, are done by the School or its staff in behalf of, with permission of, and as agents for the Sponsors.

29. INSURANCE REIMBURSEMENTS. Unless otherwise stated in writing, Pilares de Esperanza takes no responsibility for the approval or processing of insurance reimbursements, payments, or billings. The Sponsors also understand that the School is not designed for normal approval for insurance funding and that the School paperwork and documentation do not meet the criteria that most insurance companies require for funding. Insurance approval for the School is normally only granted on an "out of policy" or "exception to policy" basis. Insurance approval is very unlikely; therefore, the Sponsors agree to maintain the fee schedule while any reimbursements or payments are being approved or processed. Sponsors agree to reimburse Pilares de Esperanza for insurance billings at a rate of $100.00 for each month billed.

30. PAPERWORK. Sponsors understand that the School wishes to utilize its resources in working closely with the students, rather than spending a lot of time and resources in Administrative and Bureaucratic duties. Therefore, the School keeps, maintains, and retains only minimal records and paperwork. The Sponsors understand and agree to accept whatever records and paperwork the School, in its sole discretion, deems necessary to keep, maintain or retain.

31. CHOICE OF JURISDICTION, LAW AND OTHER MATTERS. SPONSORS AGREE TO BE SUBJECT TO JURISDICTION OF THE COURTS OF COSTA RICA, IN ANY DISPUTE BETWEEN THE PARTIES TO THIS AGREEMENT. The parties agree that this Agreement constitutes a business transaction and services rendered within Costa Rica. Therefore, the parties agree that the Costa Rica law shall govern this Agreement. Moreover, the parties agree that all disputes and/or claims may only be filed in Costa Rica and are under the jurisdiction of the courts of Costa Rica. In the event any part of this Agreement is determined to be invalid or unenforceable the remaining provisions of this Agreement shall remain valid and enforceable according to applicable law.

32. INDEMNIFICATION. Sponsors shall indemnify Pilares de Esperanza, and all of their owners, operators, managers, agents, employees, contractors, sub-contractors and consultants and hold them harmless from and against any and all legal actions or proceedings that may be instituted as a result of the student's enrollment in the School. This indemnification includes any liability, loss, costs, expenses or damages. Expenses shall include, but are not limited to all reasonable attorney fees, court costs, other legal costs, expenses or damages resulting out of any action taken by any parent and/or guardian; third party; or student, even anytime after the age of majority. All expenses shall be paid by the Sponsors.

In cases where Pilares de Esperanza is the prevailing party, Sponsors shall also indemnify Pilares de Esperanza, and all of their owners, operators, managers, agents, employees,

contractors, sub-contractors, and consultants and hold them harmless from against any and all legal actions or proceedings that may be instituted by the Sponsors. This indemnification includes, but is not limited to all reasonable attorney fees, court costs, other legal costs, expenses or damages.

Sponsors have read the foregoing clause for indemnity and understand the meaning of this clause and what Indemnification means; to restore the individual of a loss, in whole or in part, by payment; to same harmless; to secure against loss or damage.

33. AGREEMENT RENEWAL. This Agreement is automatically renewed if the student remains in the School past three months.

34. EARLY ENROLLMENT TERMINATION.

A. Liquidation Provision. The School recognizes and affirms that since Sponsors maintain all parental authority and responsibility, Sponsors can remove the student at will. However, this Agreement is for a three (3) month minimum Enrollment Period. The Sponsors agree to give the School ninety (90) days written notice prior to the actual withdrawal or to pay to the School an amount equal to ninety (90) days payment. Twelve (12) month minimum Enrollment Period. A significant discount was given based on a 12 month minimum enrollment. If a student leaves the school before the 12 months, the Sponsors agree to give the School a ninety (90) days written notice prior to the withdrawal date or the Sponsors will be obligated to pay to the School an amount equal to ninety (90) days payment. Either option will be paid at the ninety (90) day tuition rate as the 12 month discount and any prepaid cash discounts are at that point, forfeited. The payment of ninety days is considered by the parties to this Agreement as a reasonable pre-estimate of the probable losses that would be sustained by the School in the event of a withdrawal of their student prior to the end of the period. This "loss" amount is not considered by either of the parties to this Agreement as a penalty for early withdrawal of the student, but is intended to reimburse the School for costs and budgeting commitments made by the School in connection with the enrollment of the student.

In cases where one parent/guardian would like to remove the student, but the other parent/ guardian wants the student to remain in the School, it is agreed by all parties that the student will remain in the School and not have their progress interrupted until a proper court hearing can be held and a decision is made by the court. All parties release and hold harmless the School for its fulfillment of this agreement.

B. Involuntary Enrollment Termination. The School reserves the right to terminate the enrollment of any student at any time if there is a default in the performance of any of the terms of this Agreement by the student or Sponsor, or if in the sole discretion of the School the student is not a suitable resident of the School or for any other reason the School determines that the student should not continue to reside at the School. This would include parents that are unwilling to follow the guidelines of the School or are, at the sole discretion of the School, unreasonable or difficult to work with. Should the monthly payment be more than five (5) days late the School may, at its option, immediately return the student home. In the event a student's enrollment is involuntarily terminated, the School shall attempt to contact the Sponsor and shall deliver the student to the nearest form of transportation or arrange, at Sponsor's

expense, to transport the student back to Sponsor's address. The Sponsors shall be responsible for the tuition during the period of time that the Student was in the School. Sponsors will also be responsible for any personal incidental costs and expenses accrued.

35. TERMINATION OF ENROLLMENT ON STUDENT CHOICE OR AGE OF MAJORITY. Pilares de Esperanza is located in Orotina, Costa Rica. Costa Rica presents a unique situation for young people that recognize the child's right of choice in several areas as described in the International Convention on the Rights of the Child, which has been written into the law of this country. For this reason, Sponsors acknowledge that the student, through his/her actions or by choice may choose to withdraw from the School at any time, without notice to or consent of Sponsors, and that Pilares de Esperanza has no obligation or authority to require the student to remain enrolled. In the case where the student chooses out of the school, arrangements will be made to withdraw the student within 24 hours and return him/her to the United States at the expense of the Sponsors. The Sponsors further agree that if the student chooses out, she/he may be transferred to a covenant school (Carolina Springs Academy in South Carolina or Gulf Coast Academy in Mississippi) to finish out the three month contract for the regular monthly tuition rate of the receiving school plus incidental fees as described by that institution. In the event that a student transfers to a covenant school, Sponsors understand that they will be billed the additional costs for any overnight stays, transportation and escort service while in transit to the covenant school. Furthermore, Sponsors release and indemnify Pilares de Esperanza from all claims, damages, causes of action, etc. in any manner relating to a student leaving the premises/school/program once the student reaches the age of majority—eighteen, and Sponsors acknowledge that Pilares de Esperanza has no obligation or duty to the Sponsors or the student regarding the manner in which the student leaves, destination, method of travel, notification of parents or other persons, etc. Sponsors further acknowledge that Pilares de Esperanza may terminate the enrollment of any student on or after the student's eighteenth birthday at the school's sole discretion if Pilares de Esperanza deems it inadvisable to keep the student enrolled in the School and that such termination may be without prior notice to either Sponsors or the student.

36. PROTECTION OF COSTA RICA AND THE SCHOOL. The Sponsors understand and agree that upon leaving the School, the Sponsors will make alternative arrangements so that their child will not go to school, reside, or remain in Costa Rica, unless (1) permission is given in writing by Pilares de Esperanza, (2) their child is 18 years of age or older, or (3) the child is living with the parents.

37. CONFLICT OF INTEREST. The Sponsors understand and agree under strict penalties of damages that they will not contract with any Pilares de Esperanza employees or former employees for any related or even non-related services while the student is enrolled in the School or upon discharge, or for a period of one year after the student is discharged from Pilares de Esperanza, without specific and written permission from the Administrator. The Sponsors also agree under the same penalties that they will not allow their child to live with or reside in the home of an employee or former employee, upon discharge, or for a period of one year after the student is discharged from Pilares de Esperanza, without specific and written permission from the Administrator.

38. PARTIAL INVALIDITY. If any provision of this agreement is held to be invalid or unenforceable, all the remaining provisions shall, nevertheless, continue in full force and effect.

39. SCOPE AND MEANING OF AGREEMENT. Sponsors and student hereby acknowledge that they have read the entire Enrollment Agreement and that they understand and agree to its provisions. The Sponsors understand that this is a legal and binding Agreement, and that this Agreement constitutes the entire Agreement between the parties. Any changes or adjustments must be written on a separate sheet and signed by both the Sponsors and the Administrator of the School to be valid. Any changes or alterations penciled in, typed or written, on this original ten-page enrollment agreement are not recognized or valid.

IN WITNESS WHEREOF, the parties have executed this Agreement as of the last date set forth below.

DATED this_____day of _____, 20_____.

SPONSORS: _____ _____
Signature Father/Guardian *Signature Mother/Guardian*

STUDENT: _____
Signature of Student

_____ _____
Address of Father/Guardian Address of Mother/Guardian

ADMINISTRATOR: _____ DATE _____
Signature of School Administrator

Sponsors understand that all addendums signed and completed with the enrollment agreement from the original school are still in effect and will transfer to Pilares de Esperanza. The following addendums will supercede similar addendums from the addendums from the original school.

_____ _____
Father/Guardian Signature ***Date***

_____ _____
Mother/Guardian Signature ***Date***

PILARES DE ESPERANZA ENROLLMENT QUESTIONNAIRE

STUDENT'S NAME _____DOB_____

Is child adopted? Yes_____ No_____

1. Father's Name_____ SSN_____

Address_____City_____State_____

Zip_____Work Phone (___)_____Home Phone (___)_____

(DOB) _____ Place of Birth _____Email _____

2. Mother's Name_____SSN_____

Address_____City_____State_____

Zip_____Work Phone(___)_____Home Phone(___)_____

Maiden Name_____(DOB)_____

Place of Birth _____Email Address_____

3. Step Father's Name_____SSN_____

Address_____City_____State_____

Zip_____Work Phone (___)_____Home Phone (___)_____

(DOB)_____Place of Birth_____Email_____

4. Step Mother's Name_____SSN_____

Address_____City_____State_____

Zip_____Work Phone(___)_____Home Phone(___)_____

Maiden Name_____(DOB)_____

Place of Birth _____Email Address_____

EMERGENCY PHONE #_____

Contact Person_____Relationship_____

5. Is family divorced? Yes _____ No_____

If divorced, which parent has custody?_____**(PLEASE ATTACH A COPY OF CUSTODY ORDER)**

6. Home Counselor_____Phone_____

Address_____City_____State_____ Zip_____

If counselor is to receive progress reports, please sign this paragraph as an authorization.

_____ _____

Father/Guardian Signature ***Mother/Guardian Signature***

ACADEMIC
STUDENT INFORMATION

Student's Name_____DOB_____

Address:_____City_____State_____Zip_____

Home Phone Number:(____)_____Student Lives With:_____

Place of birth_____Student's S.S. # _____

If Adopted, give date of adoption_____

Religious preference_____Ethnic Origins_____

Age_____ Height_____Weight _____Hair _____ Eyes _____

Current Grade Level_____

Last School Attended_____

School Address_____State_____Zip_____

Previous Schools Attended in grades 9-12 _____
Name Address Phone

_____
Name Address Phone

Academic Performance: Behind_____Ahead_____Right on Track _____

If Student is behind or ahead, please explain:_____

Prior to admission at Pilares de Esperanza your student was living:

_____ at home_____ with relatives_____ alone or with friends_____ private school

Date of Admission_____**Student Number**_____
Office Use Only

Transcript information in *unopened envelope with seal of former school,* including any special education records, immunization records, a copy of the birth certificate, and the student's social security number must be brought with the student upon enrollment into the School.

***PLEASE SEND A COPY OF STUDENT'S BIRTH CERTIFICATE AND IMMUNIZATION RECORDS TO PILARES DE ESPERANZA ACADEMIC DEPT.: LISTA DE CORREOS, APTDO POSTAL 1894041, OROTINA, ALAJUELA, COSTA RICA*, CENTRO AMERICA**

REQUEST FOR TRANSFER OF CONFIDENTIAL RECORDS

This form is provided by PILARES DE ESPERANZA ACADEMIC DEPT, for the purpose of obtaining your child's school and psychological/psychiatric records.

Name of Student:_____ Birth date:_____

I hereby authorize PILARES DE ESPERANZA ACADEMIC DEPT. to obtain from:

_____

_____

all school and psychological/psychiatric records as defined by Public Law 93-380 and other federal laws pertaining to educational records.

PLEASE SEND THE FOLLOWING INFORMATION;

_____1. Official transcript of credit and classes to date.

_____2. Withdrawal grades, including incomplete classes.

_____3. Test data, health records, and counseling information.

_____4. Suggested course outline.

_____5. Units and courses required for graduation.

_____6. Any of the student's records pertaining to the psychiatric or psychological evaluation of the student.

_____7. Special Education/Guidance Records

_____8. Other:_____

_____ _____

Father/Guardian Mother/Guardian

Date _____

PLEASE SEND RECORDS TO:
PILARES DE ESPERANZA ACADEMIC DEPT.
LISTA DE CORREOS, APTDO POSTAL 1894041
OROTINA, ALAJUELA
COSTA RICA, CENTRO AMERICA
Fax (011 from U.S) 506 428 8096

Please rate and describe your child's past performance in the following areas

FAMILY — Relates well with brothers and sisters:

Very Negative		Negative		Positive		Very Positive	
1	2	3	4	5	6	7	8

AUTHORITY — Responds to parental authority:

Very Negative		Negative		Positive		Very Positive	
1	2	3	4	5	6	7	8

FRIENDS — Has a variety of friends:

Very Negative		Negative		Positive		Very Positive	
1	2	3	4	5	6	7	8

SCHOOL — School Attendance:

Very Negative		Negative		Positive		Very Positive	
1	2	3	4	5	6	7	8

COMMUNITY — Attitude toward community involvement:

Very Negative		Negative		Positive		Very Positive	
1	2	3	4	5	6	7	8

SELF IMAGE — Self image, attitudes, personal goals:

Very Negative		Negative		Positive		Very Positive	
1	2	3	4	5	6	7	8

CHURCH — Church activity:

Very Negative		Negative		Positive		Very Positive	
1	2	3	4	5	6	7	8

_____

FAMILY MEMBERS

Please list in chronological order all brothers, sisters, step and half brothers and sisters, living or deceased.

NAME	SEX	AGE	RELATIONSHIP	ADDRESS

List all others that have lived in your home during your child's in home residence or who are living in your home at this time.

NAME	SEX	AGE	RELATIONSHIP	COMMENTS

COMMENTS:

ADDENDUM #1

AUTHORITY TO ACT

Pilares de Esperanza may perform any and all acts necessary as determined in their judgment, or the judgment of each of them severally, for the health, welfare, and progress, of the student, including but not limited to (decisions in your place and stead), obtaining passport and entry visa, consents for hospitalization and/or consent for medical treatment, assistance and medical aid, psychological examination and assistance, of whatever nature, including surgery of any kind.

_____ _____

Father/Guardian Signature ***Mother/Guardian Signature***

ADDENDUM #2

Please Note: A completed contract requires **two signatures** by both guardians. In the event the legal guardians of the student are separated or divorced both parent's signatures are required on the contract, unless the contract is accompanied by legal custody papers specifying who has custody. If both signatures are not on the contract, or custody papers are not submitted with the contract upon admission, the contract will be considered incomplete and the child **will not** be admitted into the School. Also, in the event that the non-custodial parent becomes adversarial to enrollment at Pilares de Esperanza, the custodial parent must move to obtain a restraining order or other legal instrument that will prevent this parent from attempting to seize guardianship or kidnap the child while studying in Costa Rica. If there are any problems of this type, the undersigned acknowledge that the child will be immediately transferred to the custodial parent's care to protect the integrity of the School and its student body.

_____ _____

Father/Guardian Signature ***Mother/Guardian Signature***

ADDENDUM #3

MEDICAL CARE RELEASE

We, the parents/guardians of_____
hereby authorize Pilares de Esperanza, Orotina, Costa Rica to obtain medical care for the student in the event of an illness, injury, or other emergency.

We further authorize medical and hospital treatment by a licensed physician to perform any procedures that he may deem to be medically appropriate for the students well being.

We also accept financial responsibility for any such medical care emergencies.

REQUIREMENT TO PROVIDE HEALTH INSURANCE

Dear Sponsors:

It must be anticipated that accidents, injuries, and acute illnesses can and do happen. For the protection of the student, the parents, and the School, every student accepted for enrollment at Pilares de Esperanza must be covered by a health insurance plan provided by the student's parents or guardians. If your family does not currently have a health insurance policy, it will be necessary for you to purchase coverage for the period of your child's enrollment. A copy of the policy must be provided to the School and will be maintained in the student's file.

In addition, the School must have on file signed health insurance claim forms (including dental, if available). Please be sure the employer and employee information sections are completed and forms are signed. The forms must be received prior to or at the time of the student's enrollment.

If you have any questions regarding the above please feel free to contact us.

The undersigned Sponsors hereby represent and warrant that their student has the following health insurance policy in full force and effect and that such health insurance policy or an equivalent policy shall be maintained at all times the student is enrolled at the School:

_____ _____

Father/Guardian Mother/Guardian

ADDENDUM #3 CONT'D

INSURANCE INFORMATION

PATIENT'S FULL NAME:_____DOB:_____

FULL NAME OF INSURED:_____DOB:_____

ADDRESS:_____CITY:_____ST:_____

ZIP CODE:_____PHONE NUMBER:_____WORK NUMBER:_____

NAME INSURANCE COMPANY:_____SS#_____

ADDRESS:_____CITY:_____ST:_____

ZIP CODE:_____ PHONE NUMBER:_____

NAME OF EMPLOYER OR GROUP:_____

_____
Father/Guardian

_____
Mother/Guardian

_____
Date

_____

ADDENDUM #4

MEDICAL & DENTAL HISTORY

CHILD'S NAME_____ **DOB**_____

		YES	NO
1	Is child taking medications?		
2	Has child been taking medications?		
3	Is child allergic to any medications?		
4	Is child allergic to any foods?		

DURING THE PAST YEAR HAS YOUR CHILD EXPERIENCED ANY:

5	Ear pain or hearing loss?		
6	Eye discomfort or sight loss?		
7	Frequent headaches?		
8	Dizziness or fainting spells?		
9	Hay fever or other allergies?		
10	Skin sores, rashes, or hives?		
11	Warts, moles, or swellings?		
12	Coughing or persistent indigestion?		
13	Stomach aches or persistent indigestion?		
14	Urinary burning or frequent urination?		
15	Sugar in the urine?		
16	Vaginal discharge?		
17	Painful menstruation?		
18	Venereal Disease?		
19	Tumor, cyst, growth, or cancer?		
20	Heart disease?		

-Continued-

_____

ADDENDUM #5

HAS YOUR CHILD EVER HAD:

		YES	NO
21	**Deformities of any kind?**		
22	**Diabetes?**		
23	**Asthma?**		
24	**Arthritis?**		
25	**Seizures, convulsions, or epilepsy?**		

HAS YOUR CHILD EVER BEEN:

26	**Suicidal?**		
27	**Sexually abused?**		
28	**Physically abused?**		
29	**Psychologically abused?**		
30	**Classified as neglected by welfare?**		
31	**Glasses or contact lenses?**		
32	**Special dietary needs?**		
33	**Orthopedic appliances including dental braces?**		

IF YOU HAVE ANSWERED "YES" TO ANY QUESTIONS FROM 1 THROUGH 33, PLEASE EXPLAIN ON PAGE TWO OF THIS FORM.

Explanations if any:_____

_____

_____

_____

HOSPITALIZATIONS AND SURGERIES IN THE PAST FIVE YEARS:

Date _____ Hospital _____

Address

Injury_____ Result _____

Date_____ Hospital_____

Address

Injury _____ Result_____

_____

ADDENDUM #6

DENTAL BRACES

If your student has braces and/or a retainer, do you wish, at your expense, to have regular check ups by a local Orthodontist? If so, please sign this statement as an authorization for care.
Monthly Orthodontist care approved by:_____

Parent or Legal Guardian_____

Date_____

SPORTS

Are there any known physical conditions that would preclude your child from participating in sports or physical education classes?

_____Yes _____No

If yes, please explain

_____

_____

_____

_____

_____

_____

_____

_____

_____

ADDENDUM #7

HONESTY

As we discuss issues with your child, we need to know what to expect in terms of their honesty.

1. Does your child have a history of misrepresenting the truth?

Yes_____ No_____

Comments/Specifics:_____

_____

_____

2. Is honesty a significant problem for your child?

Yes_____ No_____

Comments/Specifics:_____

_____

_____

3. As we discuss specific issues, such as your child's past problems, home situation, and the way they have interacted with the family, which best describes the information your child will give?
Please circle one:

a. The information my child gives would tend to be completely accurate.

b. The information my child gives could be fairly inaccurate.

c. The information my child gives might be significantly inaccurate.

Comments/Specifics:_____

_____

_____

4. Considering your child's pattern of honesty, on a scale of 1-10, one being rarely truthful and ten representing the highest level of truthfulness, *circle your opinion of his/her overall honesty*:

0 1 2 3 4 5 6 7 8 9 10

Parent Signature _____

Date _____

ADDENDUM #8

COMMUNICATION AND PROGRESS UPDATES BETWEEN THE FAMILY AND THE SCHOOL

The Sponsors understand and agree that the Family Rep will set up regularly scheduled phone calls, for the purpose of coordination of updates and progress reports. The norm for these regularly scheduled phone calls is every two weeks, however your Family Rep will establish the schedule on an individual basis, but not to be more often than once a week. Due to scheduled office hours, other previously scheduled phone calls, scheduled meetings, and other various commitments working with students, there is little flexibility for your Family Rep in scheduling your regularly scheduled phone calls. Sponsors understand that the Sponsors will need to call the Family Rep at the regularly scheduled time. Sponsors also understand and agree that if they are unable to call the Family Rep during the scheduled time, they will need to call at the next scheduled time or reschedule through electronic mail with the Family Rep. Sponsors further understand and agree that except in cases of emergency, Family Reps have prior scheduling commitments that do not allow them to receive or make calls in between regularly scheduled phone calls; however, your Family Rep may be contacted by e-mail, if needed, between scheduled phone calls. Any calls from the Family Rep to the parents would only be for some special purpose, and would be made on a **collect basis**. The Sponsor understands this and agrees to hold harmless and release the School of any liability or damages resulting from communication problems.

The administrators will also call the parents at least quarterly to offer an additional perspective about their experience with the youth's progress. Other calls are made according to the particular needs of each family.

In an effort to keep our fees as low as possible, any telephone calls made to the parents by the student or staff (Pertaining to the child's care, disposition, and education) will be made on a collect-call basis or by using a credit card call number submitted by the sponsors.

I/We the undersigned, do hereby give my authorization for Pilares de Esperanza officials to make collect telephone call/or credit card calls to the numbers listed below, as necessary to discuss my child's care, disposition, education, or treatment.

_____ _____

Father/Guardian Signature ***Mother/Guardian Signature***

ADDENDUM #9

COMMUNICATION WITH STUDENTS

TELEPHONE POLICY

Each student speaks with their parents with a scheduled phone call per the following schedule and the student's respective level status, as is the case with the duration of each conversation. The School will call the parents upon the student's arrival to set up the first scheduled call in the case where the parents do not accompany their child to the program. From that point forward the Family Rep will coordinate the weekly, bi-weekly, or monthly calls according to the child's status of achievement. All scheduled calls will take place with the Family Rep. Phone logs are kept and maintained to assure equal access to the telephones.

Throughout the student's stay at the School, both Sponsors and Students are encouraged to write as often as they choose but unscheduled telephone calls are not recommended as they are disruptive to the students' progress and it distracts from their focus in the School. Sponsors understand that there is limited telephone contact with the student until the student achieves higher levels. It is very important that the Student earn these privileges. As the students demonstrate their personal progress in the School by achieving higher statuses, weekly telephone calls with the Sponsors become increasingly a more important part of their development. The calls are scheduled as follows:

1. Classical	(0 – 199 Hope credits)	5 minutes	biweekly
2. Enlightenment	(200 – 999 Hope credits + interview)	5 minutes	biweekly
3. Renaissance	(1000 and above Hope credits + interview)	10 minutes	once per week
4. Neo-Classical	(2400 Hope credits + interview)	15 minutes	once per week
5. Impressionist	(1600 additional Hope credits+ interview)	20 minutes	once per week
6. Magic Realist	(1600 additional Hope credits + interview)	25 minutes	once per week
7. Hope Scholar Grad.	(1600 additional Hope credits + interview)	30 minutes	once per week

The sponsors and students understand that the student's Hope Credits "zero out" for each new level as they begin levels 4-7

The Sponsors understand that students graduate to the each level only after a successful interview and voteup process between the student and School Interview Panel (consisting of Student Council, the Family Rep, and the assigned Family Parent)

_____ _____

Father/Guardian Signature ***Mother/Guardian Signature***

_____

ADDENDUM #10

VISIT POLICY

To better serve the parents and their student, the Academy strongly recommends that the parents visit the facility before enrolling their children.

Thereafter, the first scheduled visit takes place during the first Parent-Child Seminar somewhere between 2½ to 4 months maximum after initial enrollment. Depending on enrollment for the seminar, this seminar may be held at a sister school in the U.S.A. In this event parents will be responsible for making travel arrangements for their student to attend the seminar.
For Hope Scholars, Impressionist and Magical Realist students, parents may schedule visits at their leisure. The school asks that they keep in mind the student's academic progress and personal goals as these visits are scheduled. All visits must be coordinated with the Family Rep.

PC Seminars take place at least quarterly in the United States of America. The School recommends that after concluding the first PC Seminar, and with the approval of the Family Rep, parents may come to the facility for some off-grounds day visits. They can pick up their student any time after 8:00 AM and must return them to the Academy before 8:00 PM and lights out.

We recommend your first visit be after your first PC Seminar. Costa Rica offers unique opportunities to explore and share adventures with your child and family that are opportunities of a lifetime—all within short driving distances of the facility. You will be scheduled for this Conference shortly after your child has been in the school 2-4 months. Upon review and approval of the School, a PC Seminar visit may be scheduled earlier if both the parent and the child demonstrate a desire and readiness for the visit by completing appropriate motivational and success Seminars. Students who achieve the fourth status level are eligible for off-grounds visits that include two overnights. Level five students are eligible for 3 overnights during off-grounds visits. It is also important that we set a proper example by adhering to the School rules ourselves. For this reason, **we ask that you REFRAIN FROM REQUESTING ANY EXCEPTIONS, as it negatively affects not only your child's progress, but the other students in the School. This is an agreement conditional to our admitting the student in the School**. Sponsors understand and agree to follow the School's visit and communication policies. Sponsors further agree that if they or their student violate the School's communication and visit policies the School may at their option discharge the student, and yet still hold the Sponsors financially accountable and responsible for the tuition on the remainder of the contract period (see Item #3) and/or the time that would equal proper written notice (see Item #34).

For students who have achieved the Neo-Classical status and with the recommendation of the Family Rep, subsequent off-grounds visits may be overnight as long as the student is progressing in all aspects of the program. The initial off-grounds overnight visit are recommended only if the telephone calls have been productive. These visits are limited to two nights off-grounds. The Family Rep will determine the student's eligibility. The first off-grounds visit is never recommended to include an overnight stay.

Upon achieving the Impressionist status, home visits are deemed appropriate as determined on an individual basis by the Family Rep. However, home visits are not considered before the student has been in the School for at least three months. The following criteria are strongly recommended.

1. Three months in the School.
2. Objectives in the Student's Personal Orientation Plan are met.
3. Situations at home are no longer considered to be a distraction (i.e. old negative contacts)
4. A review by the Administrator with all department heads has been held.

_____ _____

Father/Guardian Signature ***Mother/Guardian Signature***

DATE _____

ADDENDUM #11

MAIL

Due to the potential harm that certain mail could cause our child or progress, we as legal guardians, (having both legal and physical custody) direct and authorize Pilares de Esperanza and its staff to monitor all addresses of outgoing and incoming mail and E-mail to assure that All mail is sent and received through us as/my legal guardians/sponsors for our student whose name is _____ and whose date of birth is _____19____.
It is understood that Pilares de Esperanza is operating at our direction, under the authority that we have as legal guardians, and as our agents in this behalf.

_____ _____

Date Father/Guardian

_____

Mother/Guardian

I understand that as a part of my success program and according to the policies established at Pillars of Hope that I will correspond only to my family members who will reserve the right to forward my letters to others. All mail must be sent to me by my sponsors/parents.

_____

Student/Signature (if 18 years of age or older)

ADDENDUM #12

RELEASE OF INFORMATION AND RECORDS

NAME:_____
I/We, the undersigned, do hereby give consent to Pilares de Esperanza to release information and records as categorized or detailed below, pertaining to the above-named student who is my child/ward.

Pilares de Esperanza is hereby given authorization to release such information to whomever it has reason to believe would use such information or records in the best interest of the above-named student; otherwise such information and records are to be held confidential.

Pilares de Esperanza reserves the right to withhold any and all school transcripts or documents pertaining to the student's academics until all financial obligations have been resolved and paid to the school. This will be verified by the schools billing office, Optimum Billing Services, LLC.

TYPE OF INFORMATION/RECORDS	SPECIFIED INFORMATION/RECORDS
Educational	
Medical/Dental	
Therapeutic	
Psychiatric/Psychological	

_____ _____
Date *Father/Guardian*

_____
Mother/Guardian

ADDENDUM #13

PERMISSION TO PHOTOGRAPH

_____DOB _____
Student's Name

We authorize the School to photograph the students for identification photographs for their files.

We further authorize the School to photograph the students in order to provide informational updates for the parents and photos to be placed on School Web-sites accessible to all School parents for the purpose of School and progress updates.

OPTIONAL AUTHORIZATIONS:

I authorize_____/do not authorize_____the School to photograph or video tape the student in a group or involved in group activities, to be used for brochures, public relations, promotional videos, or other related Marketing purposes.

I further authorize_____/do not authorize_____the School to photograph, video tape or interview the student individually for brochures, public relations, promotional videos, or other related Marketing purposes.

_____ Date_____
Father/Guardian

_____ Date_____
Mother/Guardian

_____ Date_____
Student

ADDENDUM #14

ZERO TOLERANCE POLICY

Pilares de Esperanza has a **zero tolerance policy** against acts of violence, destruction of property and physical aggression as well as other dangerous, severely disruptive, or extremely defiant behavior exhibited by any student. These behaviors are not tolerated at Pilares de Esperanza for the following reasons:

1. Endangers students, staff, and the integrity of the School
2. Distracts and significantly impedes the progress of others
3. Destructive to the general environment and positive peer culture
4. Consumes staff time and attention, cheating the other students
5. Allows negative role models for new or impressionable students
6. Influences other students to similarly misbehave or act out
7. Leaves the school without permission of faculty, staff, or legal guardian

Therefore, any student exhibiting these types of behaviors will be immediately expelled and transported, at the Sponsor's expense, to an alternative location chosen by the Sponsors.

Specifically, the following behaviors will result in an immediate expulsion from the School:

a. Students who are physically aggressive or seriously threaten other students, staff, or property.
b. Students who require staff to use protective holds to prevent harm to themselves, others, the facility, or private property of others.
c. Students that require continued individual staff supervision for longer than 8 hours.
d. Students who leave the facility without permission.

_____ Date_____
Father/Guardian

_____ Date_____
Mother/Guardian

_____ Date _____
Student's signature

ADDENDUM #15
PROBATIONARY STATUS

The Sponsors hereby understand and agree that the student_____ has been accepted at Pilares de Esperanza on a *Probationary* basis. In accordance with the attached "Zero Tolerance Policy", if the student is found to be disruptive to the positive environment at Pilares de Esperanza, Sponsors agree that the student will be immediately expelled and transported by independent transport company, or any other person or company chosen by the Sponsors, to an alternative location chosen by the Sponsors. The school will contact the Sponsor prior to transfer.

____ ____
(initials)

The Sponsors have the option of having the student return to the Pilares de Esperanza upon further review.

____ ____
(initials)

The Sponsors agree to be responsible for the cost of transportation by an independent transport company. The sponsors also hereby give the School permission to sign the transport agreement with an independent transport company in their place and stead.

____ ____
(initials)

The Sponsors understand that Pilares de Esperanza does not own, control, direct, or manage other institutions or the independent transport company. Therefore, Pilares de Esperanza does not assume any liability nor responsibility, implied or otherwise, for other schools or the independent transport company. This would include the care of your child while at these Schools or during transportation. The Parents/Sponsors hereby agree to release and forever hold harmless Pilares de Esperanza from any liability connected with other schools or the independent transport company.

____ ____
(initials)

The Sponsors understand that Costa Rica is a special place where students, minors of age have special rights under the International Convention of the Rights of the child that have been adopted into law in this country.

____ ____
(initials)

_____	_____
Parent/Sponsor	**Parent/Sponsor**
_____	_____
Date	**Date**

ADDENDUM #16

MEDICAL CARE RELEASE FORM

We, the parents/guardians of _____
hereby authorize Pilares de Esperanza to obtain medical care for the participant in the event of an illness, injury, or other emergency.

We further authorize medical and hospital treatment by a licensed physician to perform any procedures that he may deem to be medically appropriate for the participants well being. We also accept financial responsibility for any such medical care emergencies.

_____
Father/Guardian

_____
Mother/Guardian

_____
Date

ADDENDUM #17

Admissions Agencies

We understand that while various admissions agencies recommend adolescent services including schools, programs, treatment alternatives, therapists, and supervised transport services; these marketing agencies do not own, control, manage, nor direct any individuals or companies that provide these services. Therefore, the admissions agencies do not assume any liability or responsibility, implied or otherwise, for Pilares de Esperanza or for your child while in the School. All liability or responsibility for any recommended services or for the care of your child is assumed entirely by the service provider, as outlined in their contract with the parents/sponsors. The Sponsors hereby agree to release and forever hold harmless these admissions agencies from any liability connected with any services including but not limited to schools, programs, treatment alternatives, therapists and/or supervised transport services recommended to the Parents/Sponsors.

_____ _____

Mother's Signature Father's Signature

ADDENDUM #18

THERAPY

The Family Rep provides orientation and motivational seminars along with professional counseling, in group settings at the School. Individual counseling sessions desired by outside agencies through certified psychologists and or psychiatrists are not included in the price of tuition but is available upon request. The School is designed so that most students can succeed and make necessary changes without having to involve individual counseling or therapy sessions. However, if needed or desired professional counseling can often be arranged with an independent professional at $100-$150 per session plus the additional cost of transportation and escort services.

Please check one of the following:

- ❑ We would like to see if Professional Counseling or Therapy Sessions could be arranged for our child with an independent Counselor, Therapist, Psychologist, or Psychiatrist.

- ❑ We do not feel Professional Counseling or Therapy Sessions are needed or desired at this time.

_____ _____

Mother's Signature Father's Signature

_____ _____

Date Phone Number

_____

Student Name

ADDENDUM #19
ITEMS TO BRING LIST

The items listed below are **ALL** we want you to send with your student, and is the **MAXIMUM** amount of clothing and toiletries to bring. **Anything else will be confiscated without guarantee of return**. We may return items by non-insured mail. We do not have room for storage. Please mark all items with a permanent marker. Contact lenses are OK, providing the student has had them long enough to have adjusted completely, to their use. Please send glasses as well, with case. The only other exceptions would be retainers for teeth, hearing devices, or doctor recommendations that will need a doctor's signed order and explanation for use or treatment (example: knee support for physical activity). Both boys and girls will receive some activity shirts upon entering the School, so there is no need for much additional clothing. ***In lieu of the following list, sponsors may send a check made out to the School for six hundred $600 and the items will be purchased for the student.***

PLEASE CHECK ITEMS THAT ARE SENT

GIRL'S LIST

- ❑ 7-10 pair white cotton athletic socks
- ❑ 1 pair athletic/sports shoes
- ❑ 1 pair soccer cleats optional (no metal cleats)
- ❑ 1 pair of shin guards (optional)
- ❑ 1 pair of one strap sandals (no back straps)
- ❑ 2 set nightwear
- ❑ 1-2 *modest* one-piece swimsuits
- ❑ 7-10 pair *modest* white cotton underwear-*no thongs allowed*.
- ❑ 7 white bras
- ❑ 5 short sleeve, round neck, plain yellow, green, or gray cotton t-shirts
- ❑ 5 modest shorts, navy blue for P.E. (Thin for heat)
- ❑ 2-3 pair blue jeans, or kaki slacks modest
- ❑ 2 bath towels, 1 beach towel
- ❑ 4 wash cloths
- ❑ 1 pillow
- ❑ 1 toothbrush
- ❑ 1 three inch, three ringed, non-designed binder
- ❑ 1 travel toothbrush holder
- ❑ 1 travel soap dish
- ❑ 1 plastic container to hold all toiletries
- ❑ 3 religious/motivational books of choice (optional)
- ❑ 1 small photo album with pictures of family members

- ❑ 6 months supply of prescribed medication**
- ❑ 1 electric razor (wet/dry)
- ❑ 1 Portable Laptop computer***
- ❑ 3-4 plain leisure outfits-see dress code below
- ❑ One outfit for semi-formal activities or religious services (optional), dress shoes acceptable
- ❑ One mattress pad twin size (optional)
- ❑ One pair swim goggles (optional)
- ❑ Read and initial dress code below:

_____Sponsor's initials _____Student's initials

FEMALE DRESS CODE AT PHLVI: A clean and well-cared-for appearance should be maintained. Clothing is inappropriate when it is sleeveless, strapless, backless, or revealing; has slits above the knee; or is form fitting. Dresses, skirts, and shorts must be two inches (four finger widths) above the knee or longer. (Capris are acceptable) Hairstyles should be clean and neat, avoiding extremes in styles and colors. Swim suits must be one piece and modest--no French cuts or strapless suits allowed. Excessive ear piercing (more than one per ear) and all other body piercing are not acceptable. Shoes should be worn in all public areas of campus.

ADDENDUM #20

BOY'S LIST

- ❑ 7-10 pair white cotton athletic socks
- ❑ 1 pair athletic/sports shoes
- ❑ 1 pair soccer cleats optional (no metal cleats)
- ❑ 1 pair of shin guards (optional)
- ❑ 1 pair of thong sandals (no back straps)
- ❑ 2 set nightwear
- ❑ 1-2 pair of modest swim trunks
- ❑ 7-10 pair white cotton underwear
- ❑ 5 short sleeve, round neck, plain yellow, green, or gray cotton t-shirts
- ❑ 5 modest shorts, navy blue for P.E. (Thin for heat)
- ❑ 2-3 pair Kakis, modest (no hip huggers)
- ❑ 2 bath towels, 1 beach towel
- ❑ 4 wash cloths
- ❑ 1 pillow
- ❑ 1 toothbrush
- ❑ 1 three inch, three ringed, non-designed binder
- ❑ 1 travel toothbrush holder
- ❑ 1 travel soap dish
- ❑ 1 plastic container to hold all toiletries
- ❑ 3 religious/motivational books of choice (optional)
- ❑ 1 small photo album with pictures of family members
- ❑ 6 months supply of prescribed medication**
- ❑ 1 electric razor (wet/dry)
- ❑ 1 Portable Laptop computer***
- ❑ 3-4 plain leisure outfits, shorts, nothing imagy, no saggy pants, chains, modest, no sleeveless. See Dress Code below.
- ❑ One set of Sunday dress for semi-formal activities and/or religious services (optional), dress shoes acceptable
- ❑ One mattress pad twin size (optional)
- ❑ One pair swim goggles (optional)
- ❑ Read and initial dress code below:

_____Sponsor's initials _____Student's initials

MALE DRESS CODE AT PHLVI: A clean and well-cared-for appearance should be maintained. Clothing is inappropriate when it is sleeveless, revealing, sagging, oversized, or form fitting. Shorts must not exceed knee length. Short sleeves must not extend below elbow. Hairstyles should be clean and neat, avoiding extreme styles or colors, and trimmed above the collar leaving the ear uncovered. Sideburns should not extend below the earlobe or onto the cheek Men are expected to be clean-shaven; beards are not acceptable. Earrings and other body piercing are not acceptable. Shoes should be worn in all public campus areas.

**Our attending Physician reviews your child's medication periodically as required by U.S. and Costa Rican law. In order to have no lapse in the medication your child is required to take, please send a 6-month supply of any prescribed medication to the School. However, we realize that a 6-month supply of a controlled substance is not always possible. We ask that you send at least a one-month supply in the original pharmacy container. In addition, we ask that you continue to mail us a 30-day supply each month, for 6 months. Any other prescription medication will be given as ordered, as long as it is received in the original pharmacy container with the student's name on it.

***All students are advised to bring their own Portable laptop PC computer or pay a computer usage fee of $89 per month to meet the minimum requirements listed below:

Wireless Internet capability, 1 Gigabyte processor, 128 megabytes RAM, with PowerPoint, Excel and Word for Windows software.

If student will be participating in the horse program, a riding helmet, riding pants, and rubber riding boots are strongly recommended. Sunglasses are also recommended for the Yachting and Oceanography Program.

THINGS NOT TO BRING

Anything that is not on the list above, this includes over the counter medicines and other **valuables;** Items that have significant financial or sentimental value should not be brought. If you have any questions not covered in the above list, contact the administrator for clarification. The contract specifically states that **The School does not accept responsibility for lost or stolen items.**

The sponsors understand that anything that is sent that is not on the checklist will be confiscated with no guarantee of return.

_____ _____

Mother's Signature Father's Signature

_____

Student Signature