



WEDNESDAY —COMMUNICATIONS—

05.16.18

UPCOMING DATES

Thursday, May 17: PAC Meeting, 6:00pm

Friday, May 18: Spirit Day

Monday, May 21: CCS Board Meeting, 4:15pm at Central Street

Wednesday, May 23: Early Dismissal, 2:40pm

EVENTS

PAC MEETING TOMORROW, May 17, 6:00pm

Thursday, May 17 will be our last PAC meeting for the school year. The meeting will be held on the front porch of the school (weather permitting).

ANNOUNCEMENTS



CROSSROADS | UPPER ROOM SUMMER PROGRAM

JUNE 11 - JULY 27 | ENROLL NOW!!!!

Great news! Crossroads has partnered with the Upper Room to provide a summer program that matches our school calendar and there is a **\$200 achievement incentive!** This program is for current K - 7th graders. More information and the application is attached. Crossroads' priority enrollment ends May 16! **Enroll today - seats are first come, first served!**

AUTO - NOTIFICATIONS FOR ABSENCE

For the safety of our scholars, on Monday, May 21 we will begin making auto calls to families whose children are absent at 10:00am. If you feel that you have received the notification in error please call the school and ensure your student's presence.

NO MORE BUS CHANGES

At this time, we can no longer accept or make changes to any transportation requests for the remainder of the school year. Any student currently utilizing school transportation will remain on their current bus and stay at their assigned stop.

\$1/MINUTE FOR LATE PICKUPS

We have had a chronic problem of students not being picked up in a timely manner. In order to encourage parents to be on time from now on we will give one warning and then will start charging parents \$1/minute for every minute a scholar is left at school after 3:55pm.

2018-19 STAFF UPDATE

The end of the school year and the beginning of the next often brings staffing changes. Mrs. Satz has been a valuable asset to our organization and we wish her the best of luck in her future adventures!

Leaving:

Laura Satz

Joining:

Tom Martin: 1st Grade

Jill Rush: Instructional Coach

Tyler Hord: Kindergarten

Updated Positions:

Erika Williams: 5th Grade

Shannon Reasby: Instructional Specialist

SUMMER CAMPS

sports | dance | art

See below for more information and the registration form. Return to Rodney Thompson by Friday to participate!

BUY A RAFFLE TICKET TO SUPPORT SAVE THE CHILDREN FOUNDATION

Students in Genius Hour have put together a service project to raise money to donate to the Save the Children Foundation. Students are raising money by selling raffle tickets. The class that raises the most money will receive a Pizza Party, and the student that is chosen in the raffle will be able to have a pizza party thrown by Genius Hour with five friends from their class. Students will be able to purchase tickets until May 18. Each ticket is 25¢.



WANTING TO VOLUNTEER FOR AN END OF THE YEAR FIELD TRIP? GET READY NOW!

All volunteers / chaperones must fill out a Volunteer Application and have a background screening before serving. Screenings can take 1 to 2 weeks to process so go ahead and get this taken care of now! [HERE](#) is the Volunteer Application. Upon receipt, Rodney Thompson will contact you with instructions for the background screening.

PLEASE NOTIFY SCHOOL OF TRANSFERS

If your student is re-enrolled for next year but has decided to attend a school outside of Crossroads Charter Schools please inform us of your decision so we can offer the seat to someone on the waitlist. Call Rodney Thompson, 816.221.3191 x331.



FIRST ANNUAL QH YEARBOOKS! PURCHASE YOURS TODAY!

We received our kid-created yearbooks and they look great! They are for sale at school or online and available until the end of the year. We will pass them out the last week of May. If you would like to purchase, they are \$10.25 each. Buy at yearbookforever.com. We are also collecting donations to ensure each student at Quality Hill gets a yearbook. If you would like to contribute, please send cash or a check to the 3rd grade teachers and we will put it toward the costs. Email QHThirdGrade@crossroadsschoolskc.org with any questions.

HOW TO PAY AFTERCARE & LUNCH FEES

Please [log on](#) to Tyler to maintain a positive lunch balance and to pay Tony Aguirre aftercare fees by the first of each month. If you have questions please contact 816.221.3191 x333 or ruptergrove@crossroadsschoolskc.org. To pay fees:

- Click **Fees & Billing (aftercare)** or **Meal Service (lunch)** on your students' Home Page
- A page will pop up with the most recent activity. Click **Online Payment** in the lower righthand corner of the screen
- Enter the amount you would like to apply to your student's account in the box, then click **Proceed to Verification**
- On the pop-up screen verify the amount you'd like to pay then click **Proceed to PayPal**
- On the Paypal Login Screen you can either login to your existing PayPal account, sign up for a new account, or click **Pay with Debit or Credit Card** to checkout as a guest

For parent information including our school calendar, lunch menu, uniform guidelines, and family handbook please visit the Parent Page on our website. <http://qh.crossroadsschoolskc.org/parents>



Crossroads Charter Schools



THE UPPER ROOM
— 2018 SUMMER PROGRAM —

**CROSSROADS / UPPER ROOM
SUMMER PROGRAM INFORMATION**
(FOR NEW AND RETURNING STUDENTS)

Dates: June 11 – July 27

Hours: 8:00 a.m. to 3:30 p.m. Monday through Friday (no school on July 4)*

Cost: Free – LUNCH PROVIDED!

*Before and aftercare is available starting at 7:30 a.m. and ending at 6:00 p.m. (no fee)

CROSSROADS / UPPER ROOM SUMMER PROGRAM

Offer is exclusive to new and returning Crossroads families attending the Crossroads / Upper Room Summer Program at these three sites:

Gregg/Klice Community Center (K-5): 1600 John Buck O'Neil Way, Kansas City, MO 64108

Brush Creek Community Center (K-8): 3801 Emanuel Cleaver II Blvd., Kansas City, MO 64130

Southeast Community Center (K-8): 4201 E 63rd St., Kansas City, MO 64130

Transportation is not provided for any location.

ACHIEVEMENT INCENTIVE

Exclusive for returning Crossroads' students enrolled in the Crossroads / Upper Room Summer Program

\$200 GIFT CARD

Students who achieve
no more than 2 absences and a C or better in every graded class
will receive a \$200 gift card

Offer is exclusive to returning Crossroads families attending the Crossroads / Upper Room Summer Program at these three sites.

Please return the application to the school or email to: RThompson@crossroadsschoolskc.org

In the event my child (children) incurs bodily injury or some other form of serious illness and if the persons listed above cannot be contacted at the numbers listed above, and immediate first aid, medical or surgical treatment appears necessary regarding such injury or illness, then I hereby authorize management staff to act on my behalf, rendering first aid and/or arranging for my child's (children) transportation and admission to a hospital. I hereby authorize and hold harmless Swope Corridor Renaissance and said representatives thereof, said hospital (and its employees or agents), and said physician from any claim or losses whatever arising out of the foregoing. The undersigned parent/ legal guardian of the above named student hereby consents to his/her participation in the Crossroads' Upper Room Summer Program (the "Program"), sponsored, in part by Crossroads Charter Schools ("Crossroads"). The undersigned and my heirs, executors, representatives, administrators, and assigns do hereby waive, release, and forever discharge the Crossroads and their respective affiliates, officers, directors, employees, contractors and agents from any and all responsibilities, liabilities and lawsuits, present or future, and causes of action for ordinary negligence, whether foreseeable or unforeseeable, arising out of or related in any manner directly or indirectly, to my child's participation in the Program, including, but not limited to, such claims that may result from any injury, illness, or death, accidental or otherwise, during or arising in any way from such participation. I hereby agree to expressly assume and accept sole responsibility for the risk of injury or death so long as they are not the result of gross negligence by Crossroads.

Parent/Guardian Signature: _____ Date: _____

Thank you, however I do not wish to enroll for the Crossroads/Upper Room Summer Program at this time.

Student name(s) _____

Parent/Guardian Signature: _____ Date: _____



Crossroads Charter Schools

SPRING, 2018

Dear Parent or Legal Guardian,

My name is Rachelle Crowe. I serve as a volunteer leading ways in which Redeemer Fellowship can serve and love our neighborhood.

Once again, we will hold camps for your children this summer. We will hold camps of different varieties. Please read the following information regarding the camps.

What: Summer Camps: *Grades 2nd - 8th (ages 7 - 13)*

When:

June 4th - 7th	Soccer Camp (TBD)
June 11th - 14th	Baseball Camp (TBD)
	Dance Camp (Redeemer Fellowship)
June 18th - 21st	Arts and Crafts Camp (Redeemer Fellowship)
	Basketball Camp (TBD)

Cost: *\$10 per child, per camp and/or \$20 total per family, per camp.*

You will be responsible for transportation, and your child needs to be dropped off before 6pm and picked up no later than 8pm. You are encouraged to stay and watch, but it is not required. Water and a meal/snack will be provided each night after the camp.

The purpose of these camps is to provide a safe environment for children to have a fun time and to let your children learn teamwork and mutual respect through organized activities.

If you are interested in participating in this event, please fill out the forms and return it to Crossroads Charter Schools by **Friday, May 18th**. Upon receiving your registration form and payment, you will be contacted for confirmation.

Thank you and we look forward to sharing another fun summer with your family!

Rachelle Crowe
Volunteer
Redeemer Fellowship
816.561.1301 (w)
816.582.0168 (c)

Rodney Thompson
Community Engagement Coordinator
Crossroads Academy
816.221.3191 ext. 331

Camps are for children Grades 2 - 8 (ages 7 - 13)



Crossroads Charter Schools

1st Child's Full Name: _____

Child's Age: _____ Grade entering in Fall 2018: _____ Gender: _____

- My child is attending:
- _____ **Soccer:** June 4th -- June 7th (6-8 pm)
 - _____ **Baseball:** June 11th -- June 14th (6-8 pm)
 - _____ **Dance:** June 11th -- June 14th (6-8 pm)
 - _____ **Arts & Crafts:** June 18th -- June 21st (6-8pm)
 - _____ **Basketball:** June 18th -- June 21st (6-8pm)

2nd Child's Full Name: _____

Child's Age: _____ Grade entering in Fall 2018: _____ Gender: _____

- My child is attending:
- _____ **Soccer:** June 4th -- June 7th (6-8 pm)
 - _____ **Baseball:** June 11th -- June 14th (6-8 pm)
 - _____ **Dance:** June 11th -- June 14th (6-8 pm)
 - _____ **Arts & Crafts:** June 18th -- June 21st (6-8pm)
 - _____ **Basketball:** June 18th -- June 21st (6-8pm)

3rd Child's Full Name: _____

Child's Age: _____ Grade entering in Fall 2018: _____ Gender: _____

- My child is attending:
- _____ **Soccer:** June 4th -- June 7th (6-8 pm)
 - _____ **Baseball:** June 11th -- June 14th (6-8 pm)
 - _____ **Dance:** June 11th -- June 14th (6-8 pm)
 - _____ **Arts & Crafts:** June 18th -- June 21st (6-8pm)
 - _____ **Basketball:** June 18th -- June 21st (6-8pm)

Parent/Legal Guardian Information:

Name of Parent/Legal Guardian: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Emergency Contact & Number: _____

Please list any medical conditions to be aware of for your child: (asthma, allergies, etc):

*** Please complete the back of this form (over)**



Consent for Minor with Release of Liability and Agreement Not to Sue

I am the parent or legal guardian of _____
(Child/Children's name/s)

and give my consent to the Child's participation in activities offered by Redeemer Fellowship.

As the parent or legal guardian of child/children, I hereby confirm that he or she is in good physical condition and able to participate in the activities offered by Redeemer Fellowship. I understand and acknowledge that in all physical activities there are certain risks of physical injuries and give this Consent for Child's participation with complete understanding of this risk.

On behalf of Child and myself, I hereby release any claim against, and agree not to sue, Redeemer Fellowship, its officers, employees, members, and agents, on account of any personal injury or death, property damage, or other harm or loss of any kind suffered or allegedly suffered by Child at, or in connection with the Redeemer Fellowship activities. This Release and Agreement Not to Sue applies to any injury, damage, or other harm or loss regardless of how it is incurred.

By signing this Consent and Agreement Not to Sue, I understand that it will apply even if the injury, damage, or other harm or loss results from or is alleged to have resulted from the negligence (of any kind) of any person or organization. This Release is fully binding upon me, my child/children, spouse, heirs, executors, administrators, successors and assigns.

I HAVE READ THIS RELEASE, I UNDERSTAND IT, AND I AM EXECUTING IT VOLUNTARILY. I AM AT LEAST 18 YEARS OF AGE.

I do not wish for my child to be photographed or filmed

Parent/Legal Guardian Printed Name _____

Parent/Legal Guardian Signature: _____

Date: _____

Emergency Phone Number: (_____) _____



Crossroads Charter Schools

Primavera 2018

Estimados Padres de Familia o Guardianes legales,

Mi nombre es Rachelle Crowe. Soy la voluntario en la Iglesia Redeemer Fellowship en Kansas City. Nuestra meta es servir y amar a nuestro vecindario.

Una vez más, tendremos campamentos deportivos para sus hijos este verano y quisiéramos invitarlos a que participen. Por favor lea la información con respecto a los campamentos.

Qué ofrecemos?: Campamentos de Fútbol, Béisbol, Baile, Fútbol Americano, Arte y Baloncesto:

Grados 2 al 8 [Edad: 7-13 años]

¿Cuándo?:	Fútbol:	Junio 4 a Junio 7
	Béisbol:	Junio 11 a Junio 14
	Baile:	Junio 11 a Junio 14
	Arte:	Junio 18 a Junio 21
	Baloncesto:	Junio 18 a Junio 21
Costo:	\$10 por niño, por cada campamento o \$20 por familia, por cada campamento	

Ustedes son responsables por el transporte de sus hijos. Tienen que llegar con sus hijos antes de las 6pm y recogerlos puntualmente a las 8pm. Son bienvenidos a quedarse y observar, pero no es obligatorio. Los niños recibirán agua y una merienda cada noche después de los campamentos.

El propósito de estos campamentos deportivos es crear un espacio sano para los niños para que aprendan cómo trabajar en equipo y crear respeto a través de actividades organizadas.

Si están interesados en que sus hijos participen en estas actividades, por favor completen estas formas y entréguelas a la escuela Crossroads antes del viernes, 18 de Mayo. En cuanto recibamos la aplicación y pago ustedes serán contactados para confirmar su asistencia.

¡Gracias y esperamos poder disfrutar de otro verano con sus hijos y su familia!

Rachelle Crowe
Volunterio
Redeemer Fellowship
816.561.1301 (w)

Rodney Thompson
Coordinador de la Comunidad
Crossroads Academy
816.221.3191 ext 331

Por favor completen esta forma y el consentimiento. Si el consentimiento no ha sido firmado la forma de registro no es válida.



Nombre completo del primer niño: _____

Edad del niño: _____ Grado en el Otoño 2018: _____ Género: _____

Va a participar en:	_____ Clínica de Fútbol soccer:	Junio 4 a Junio 7 (6-8 pm)
	_____ Clínica de Béisbol:	Junio 11 a Junio 14 (6-8pm)
	_____ Clínica de Baile:	Junio 11 a Junio 14 (6-8pm)
	_____ Clínica de Arte:	Junio 18 a Junio 21 (6-8 pm)
	_____ Clínica de Baloncesto:	Junio 18 a Junio 21 (6-8 pm)

Nombre completo del segundo niño: _____

Edad del niño: _____ Grado en el Otoño 2017: _____ Género: _____

Va a participar en:	_____ Clínica de Fútbol soccer:	Junio 4 a Junio 7 (6-8 pm)
	_____ Clínica de Béisbol:	Junio 11 a Junio 14 (6-8pm)
	_____ Clínica de Baile:	Junio 11 a Junio 14 (6-8pm)
	_____ Clínica de Arte:	Junio 18 a Junio 21 (6-8 pm)
	_____ Clínica de Baloncesto:	Junio 18 a Junio 21 (6-8 pm)

Nombre completo del tercer niño: _____

Va a participar en:	_____ Clínica de Fútbol soccer:	Junio 4 a Junio 7 (6-8 pm)
	_____ Clínica de Béisbol:	Junio 11 a Junio 14 (6-8pm)
	_____ Clínica de Baile:	Junio 11 a Junio 14 (6-8pm)
	_____ Clínica de Arte:	Junio 18 a Junio 21 (6-8 pm)
	_____ Clínica de Baloncesto:	Junio 18 a Junio 21 (6-8 pm)

Información de los padres o guardianes:

Nombre del padre o guardián legal: _____

Dirección: _____ Ciudad: _____

Estado: _____ Código postal: _____ Teléfono del padre o guardian legal: _____

Nombre de Contacto de Emergencia: _____

Teléfono contacto de Emergencia: _____

Por favor indique si su hijo tiene una condición médica que necesitamos saber: (asma, alergias, etc)

***Por favor complete el otro lado de esta página**

**Consentimiento de un menor dando la liberación de responsabilidad y
acuerdo de no demandar.**

Yo soy el padre o guardián legal de _____
(Nombre del niño)

y doy mi consentimiento para que mi niño participe en el programa deportivo de verano de Redeemer Fellowship. Como el padre o guardián legal de este niño yo atesto que mi hijo está en buena condición física y puede participar en las clínicas del programa deportivo de verano de Redeemer Fellowship. Yo entiendo que en toda actividad física deportiva hay riesgos de lesiones físicas y yo le doy a mi hijo el consentimiento a que participe en este programa a entendiendo los riesgos.

Yo personalmente y en nombre de mi hijo eximo de cualquier reclamación, y estoy de acuerdo en que no demandaré a Redeemer Fellowship y a toda otra persona que participe en el programa deportivo de verano, incluyendo a oficiales, empleados, miembros y agentes de otras organizaciones, por cuenta de riesgos físicos o muerte, daños a la propiedad, o el sufrimiento de cualquier tipo de daños o pérdida presuntamente sufrida por el niño en o en conexión con las clínicas deportivas del verano. Ésta liberación y acuerdo a no demandar es aplicable a cualquier lesión, herida, daño o pérdida sin importar cómo haya sucedido.

Al firmar este consentimiento y acuerdo a no demandar yo entiendo que, ésta es aplicable aunque la lesión, herida, daño, o pérdida sea el resultado de o supuestamente sea el resultado de cualquier tipo negligencia de parte de cualquier persona u organización. Ésta liberación es totalmente vinculante sobre mí, mi hijo, mi esposo o esposa, herederos, o testamentario.

Yo he leído este documento de liberación y yo entiendo que lo estoy ejecutando voluntariamente. Yo tengo por lo menos 18 años de edad

Yo no deseo que mi hijo sea fotografiado o filmado.

Firma del padre o guardián legal: _____

Fecha: _____

Número de teléfono de emergencia: (_____) _____