



# SUMMER 2019 REGISTRATION

1407 S. 8th Street  
Richmond, IN 47374

Inspiring all girls to be  
**strong, smart, and bold<sup>SM</sup>**

List all conditions including  
food/medical allergies and  
any health needs and  
restrictions:

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School: \_\_\_\_\_ **2019-20** School Year  
Entering Grade: 2 3 4 5 6 7 8

## PARENT/GUARDIAN AUTHORIZATION

I, \_\_\_\_\_, as parent/legal guardian of \_\_\_\_\_ give my permission for her to attend the Girls Inc. of Wayne County Summer 2019 program during its operating hours of 9:00am-5:30pm (7:30am for Early Bird) each Monday through Friday for 6 weeks **starting Mon., June 3, 2019 and running through Fri., July 12, 2019**. I understand that activities will be taking place in and outside of the center located at 1407 S. 8th St. in Richmond, IN, including various field trips. My daughter and I will not hold Girls Inc. of Wayne County responsible for any accident or injury in or outside of the center. In the case of a medical emergency, I give my permission for my daughter to be treated, as needed, in the event that I cannot be contacted. I understand that I will be financially responsible for the cost of such treatment. I also give my permission for photos and/or video taken during Girls Inc. activities to be used for publicity purposes; including on Girls Inc.'s Facebook page.

**INFORMATION SHARING AUTHORIZATION:** I authorize the collection of pertinent information regarding behavior, attitude and knowledge including confidential information as deemed relevant by Girls Inc. for programmatic purposes. I give my consent to share information. By signing this form, I authorize Girls Inc. of Wayne County to exchange confidential information and work together with partner agencies (including schools) for Girls Inc. members (i.e. grades, attendance). This information will be used for required grant reporting, to assess program progress and to develop educational profiles of my child/Girls Inc. members. I understand that personal records are protected by various federal and state laws and cannot be disclosed without this, my written consent, unless otherwise authorized.

Parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

## CONTACT & EMERGENCY INFORMATION

Relationship to girl \_\_\_\_\_

Full name \_\_\_\_\_

Address \_\_\_\_\_

Home Ph \_\_\_\_\_ Cell Ph \_\_\_\_\_

Place of work \_\_\_\_\_ Ph \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to girl \_\_\_\_\_

Full name \_\_\_\_\_

Address \_\_\_\_\_

Home Ph \_\_\_\_\_ Cell Ph \_\_\_\_\_

Place of work \_\_\_\_\_ Ph \_\_\_\_\_

Email: \_\_\_\_\_

We need at least one other emergency contact:

Name \_\_\_\_\_ Name \_\_\_\_\_ Name \_\_\_\_\_

Relation to girl \_\_\_\_\_ Relation to girl \_\_\_\_\_ Relation to girl \_\_\_\_\_

Phone # \_\_\_\_\_ Phone# \_\_\_\_\_ Phone# \_\_\_\_\_

# GIRLS INC. REGISTRATION INFORMATION

We ask that you complete the following questionnaire. **This information helps us receive the funds we need to offer our programs.** This information will be held in strictest confidence. **Mark all that apply.**

- A. Girl's primary household: \_\_\_\_\_ Two parent household \_\_\_\_\_ Single Mom \_\_\_\_\_ Single Dad \_\_\_\_\_ Joint custody/ two households \_\_\_\_\_ Other
- B. Total number of individuals in girls primary household: \_\_\_\_\_
- C. Ethnic Group: \_\_\_\_\_ African American \_\_\_\_\_ Asian American  
 \_\_\_\_\_ Bi-racial \_\_\_\_\_ Caucasian  
 \_\_\_\_\_ Hispanic \_\_\_\_\_ Native American  
 \_\_\_\_\_ Other
- D. Yearly income of household: \_\_\_\_\_  
 \_\_\_\_\_ Less than \$10,000  
 \_\_\_\_\_ \$10,000 - 14,999 \_\_\_\_\_ \$25,000 - 29,999  
 \_\_\_\_\_ \$15,000 - 19,999 \_\_\_\_\_ \$30,000 - 49,999  
 \_\_\_\_\_ \$20,000 - 24,999 \_\_\_\_\_ \$50,000 and above

## REGISTRATION FEES

Fees will range from \$140 - \$310 for the Monday through Friday 6 week summer program according to household income:

Less than \$10,000	= \$ 95 + \$45 activity fee	= \$140
\$10,000 - \$14,999	= \$110 + \$45 activity fee	= \$155
\$15,000 - \$19,999	= \$125 + \$45 activity fee	= \$170
\$20,000 - \$24,999	= \$145 + \$45 activity fee	= \$190
\$25,000 - \$29,999	= \$180 + \$45 activity fee	= \$225
\$30,000 - \$49,999	= \$230 + \$45 activity fee	= \$275
\$50,000 and above	= \$265 + \$45 activity fee	= \$310

A \$35 non-refundable deposit is required at the time of registration.

A \$10 late fee will be charged for each 15 minutes after 5:30pm beginning at 5:31pm.

*Registration is limited. Registration for current members begins February 1, 2019, February 15 for previous members not currently enrolled and March 1 for the general public, provided spaces are still available. Registrations may be mailed or dropped off at 1407 S. 8th St. between 9am and 6pm.*

Early Bird is \$65 for the entire summer. Drop off is available at 7:30am

- Yes, I would like Early Bird for \$65  
 No, I will drop off at regular program time, not before 8:45am



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### Office Use

- Summer Program Fee
- Early Bird Fee
- TOTAL AMOUNT DUE

- I will pay the total now.
- I will pay the \$35 non-refundable deposit now and the balance by June 3, 2019.

Date: