



SUMMER 2022 REGISTRATION

1407 S. 8th Street
Richmond, IN 47374

Inspiring all girls to be
strong, smart, and boldSM

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

Name _____ Birthdate _____ Age _____

Address _____

City _____ State _____ Zip _____

School: _____ **2022-23 School Year**
Grade: K 1 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 2022 program during the hours of 7:45 a.m.-6 p.m. Monday through Friday for 8 weeks beginning **Monday, June 6 - Friday, July 29, 2022**. I understand activities will occur both at the Center located at 1407 South 8th St. Richmond, IN, and offsite during select field trips. It is understood that Girls Inc. of Wayne County will not be held liable for any accident or injury in or outside of the Center. In case of a medical emergency, I give permission for treatment to be administered as needed, in the event that I cannot be contacted. I understand that I will be financially responsible for the cost of treatment. Additionally, I grant permission for photos and/or video taken during Girls Inc. activities to be used for publicity purposes; including the Girls Inc.'s Facebook page.

By signing this form, I authorize Girls Inc. of Wayne County to exchange confidential information and work together with partner agencies. This information will be used for required grant reporting to assess program progress. 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. **Initials** _____

Photo release: I give my consent for photos/videos taken during Girls Inc. activities to be used for publicity purposes, including online and in print. **Initials** _____

Liability Waiver: I agree that Girls Inc. of Wayne County will not be responsible for any accident to my girl while at Girls Inc. or while she is engaged in any offsite activities. I acknowledge that I have received the Code of Conduct and agree to abide by the rules and regulations as explained in it. **Initials** _____

Payment Policy: I have read and agree to the Membership Payment Policy. **Initials** _____

Parent/Guardian _____ **Date** _____

CONTACT and 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: _____

Emergency contact (this information is required) :

Name _____ Name _____ Name _____

Relation to girl _____ Relation to girl _____ Relation to girl _____

Phone # _____ Phone# _____ Phone# _____

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We ask that you complete the following questionnaire. **This information helps allows us to receive funding to continue offering our programs.** All information is confidential. **Check 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:

Black or African American Asian American

Bi-racial Caucasian

Hispanic Native American

Middle Eastern Other

D. Yearly income of household:

Less than \$14,999 \$15,000 – 19,999

\$20,000 – 24,999 \$25,000 - 29,999

\$30,000 –34,999 \$35,000 – 49,999

\$50,000 and above

REGISTRATION FEES

\$75 per week fee is required one week prior to attending.

\$50 per week sibling rate.

First week due at registration.

A \$10 late fee will be charged for each 15 minutes after 6 p.m.

Please select the week(s) for which you would like to register.

Monday, June 6—Friday, June 10

Monday, July 4 —Friday, July 8

Monday, June 13—Friday, June 17

Monday, July 11 —Friday, July 15

Monday, June 20—Friday, June 24

Monday, July 18 —Friday, July 22

Monday, June 27—Friday, July 1

Monday, July 25 —Friday, July 29

Weekly payment plan is available.

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA

**girls
inc.®**

Inspiring all girls to be strong, smart and bold

Office Use

Scholarship Amount: _____

Paid In Full Discount: _____

Sibling Rate: _____

Total Due: _____