



Administrative Office:
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 www.girlsincapitalregion.org

of the Greater Capital Region



Summer Sessions

Session 1 : June 24-28

"Baking With Chemistry" - Girls will investigate the basics of Chemistry as they bake delicious goods.

Session 2 : July 1-5

"R.E.A.C.H." - Girls will work with group members to solve fun and challenging problems. Activities promote fitness training, team building, and athletic participation.

Session 3 : July 8-12

"Headed for Greatness" - Have you ever wanted to be a firefighter, an EMT, a law enforcement officer, a scientist, something in media production? Girls will explore the many different career possibilities.

Session 4 : July 15-19

"Galaxy Girls" - Explore the universe, galaxies, stars, solar system, and beyond. Girls will learn about space science, Aeronautics and Physics.

Session 5 : July 22-26

"Boon Pow Wow" - Girls will try different science experiments that will teach them basic principles and how these principles are used every day. Get ready to build, explode and explore science fun.

Session 6 : July 29– August 2

"Around the World in 5 Days" - Each day a different country is explored and girls will learn about language, fashion, customs, and food of the world. ***This week there will be an overnight trip to the Adirondacks. The girls will leave camp the morning of Thursday, August 1st and return the evening of Friday, August 2nd. **ALL CAMPERS THAT WILL BE ATTENDING THE OVERNIGHT NEED TO PAY FOR THIS WEEK IN ADVANCE. PAYMENT NEEDS TO BE RECEIVED BY MONDAY, JULY 22ND. ANY PAYMENT RECEIVED AFTER JULY 22ND WILL NOT GUARANTEE A SPOT FOR THE OVERNIGHT. SPACES WILL BE LIMITED*****

GIRLS INC. WELCOMES YOU!

Girls Inc. of the Greater Capital Region is pleased to announce our summer program for 2019! We welcome girls to join us in a variety of programs and activities geared to inspire all girls to be **strong, smart and bold.**

Who: Girls who are entering *Kindergarten through 8th grade*

What: A spectacular 6 week Summer Fun program!

When: June 24 through August 2, 2019 from 9:00am to 5:00pm

Where: 962 Albany St., Schenectady, NY 12307

Cost: \$115 per week or \$210 for 2 weeks paid in advance. The discount does not apply to scholarships. Each week there is a field trip fee of \$5.00.

REGISTRATION

Completed paperwork, including immunization records, and full payment for the first session will be due by **Thursday, June 13th.** If payment has not been received by this date, spaces will be forfeited to those on our waiting list.

There are **no refunds** for withdrawal from the programs after **Thursday, June 20th.**

Scholarships are available on a **limited basis** for our summer program.

Copies of paystubs equivalent to one months pay, must be submitted with the registration form if you are applying for a scholarship.

Payment Options: Camp MUST be paid on the Friday before the start of the each session

- Payment can be made in cash, check, money order, Visa or MasterCard.
- Did you know that the fee for 2 weeks is only \$210 if paid 2 weeks in advance?



imagination at work

GE is proud to be the signature sponsor for Girls Inc.

Rights of Parents and Guardians

Parents and Guardians have the rights:

- to be informed by the camp director, or her designee, of any incident involving your child, including serious injury, illness or abuse
- to review inspection and investigation reports for a camp, which are maintained by the local health department issuing the camp a permit to operate (present and past reports are available).
- to review the required written camp plans. These are on file at both the camp and the health department issuing the permit to operate.

Girls Inc. would like to thank **National Grid** for being the 2019 presenting sponsor of Summer Fun. **National Grid** has a strong commitment to the community and supports programs that reinforce its *Engineering Our Future* initiative to attract students to careers in engineering.

nationalgrid
HERE WITH YOU. HERE FOR YOU.

GIRLS INC. SUMMER APPLICATION 2019

Member's Last Name: _____ Member's First Name: _____
 Address: _____ City: _____ Zip: _____
 Cell/Phone: _____ - _____ - _____ Email: _____
 DOB: ____ / ____ / ____ Age: ____ Grade in Fall 2019: ____ School: _____
 Parent/Guardian's Name: _____ Work Number: _____
 Additional Parent/Guardian's Name: _____ Work Number: _____
 Emergency Contact: _____ Phone: _____ - _____ - _____ Cell: _____ - _____ - _____
 Do you know anyone who attended Girls Inc.? Yes ____ No ____ If so who? _____
 Their current address: _____ City: _____ State: _____ Zip: _____

The following information is required for reporting to funding sources: Information remains confidential

Yearly Household Income: \$ _____ Number of People living in the home: _____

Whom the member lives with : Both parents: ____ Mother Only: ____ Father Only: ____

One parent at a time (Joint Custody): ____ Other Guardian (Please List): _____

Foster Care: (please check one): Yes ____ No ____

Ethnicity (check all that apply): Black/African American: ____ White/European American: ____

Hispanic/Latina: ____ Native American/American Indian: ____ Multiracial/Multiple/Biracial Heritage: ____

Other: _____

Home Language (other than English): Spanish: _____ Other: _____

SCHENECTADY SUMMER FUN SESSIONS

(Please check attending sessions)

____ Session 1: June 24 - June 28, 2019 \$115 ____ Session 2: July 1 - July 5, 2019 \$115 ____ Session 3: July 8 - July 12, 2019 \$115	____ Session 4: July 15 - July 19, 2019 \$115 ____ Session 5: July 22 - July 26, 2019 \$115 ____ Session 6: July 29 - August 2, 2019 \$115
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SCHOLARSHIP APPLICATION

To Parents/Guardians: The following information is required for scholarships (a month of paystubs must be provided with scholarship application) and grant reporting purposes:

Are you applying for a scholarship? Yes ____ No ____ If yes, it is mandatory that the following questions are answered:

1. Annual family income: \$ _____
2. Number of people living in the home: _____
3. No. of children in family attending camp: _____

In order to be considered for the scholarship, all paperwork, including immunization records must be turned in.

Please allow up to five (5) business days for your scholarship reward.

NY STATE LAW REQUIRES THE FOLLOWING TO BE COMPLETED PRIOR TO START OUR SUMMER PROGRAM

Health Insurance Carrier: _____ Group No.: _____ ID# _____

Child's Physician: _____ Date of last physical: _____ (must be within last 6 months)

1. Health concerns or learning problems: _____

2. Does the member have any food restrictions (not allergies): Yes ___ No ___ If yes what: _____

3. Does the member have any *allergic reactions*: Yes ___ No ___

Please specify in detail: _____

If bee sting kit or inhaler is needed, will she carry it at all times? Yes ___ No ___

4. Is your child currently on any *medication*? Yes ___ No ___

If yes, please explain (all medications must be accompanied by a doctor's note permitting the administration:

Medication(s): _____ Administer Times: _____

Please provide the most recent immunization records. The application will be incomplete until received.

TREATMENT CONSENT: I hereby grant permission for my daughter to become a member of Girls Inc. of the Greater Capital Region. I authorize a staff member of said organization to consent to emergency medical treatment at any health care facility as necessary to preserve the health of my daughter.

Initials _____

FIELD TRIP CONSENT: I hereby grant permission for my daughter to participate in field trips and neighborhood outings arranged and supervised by the staff of Girls Inc., and therefore allowing my child to be transported by vehicle or walking (with adult supervision) in order to arrive at the destination.

Initials _____

PHOTOGRAPH CONSENT: I give permission for my daughter to be photographed, filmed and/or recorded during Girls Inc. activities for in-house and/or news purposes.

Initials _____

SUNSCREEN CONSENT: I give permission for my daughter to carry and use sunscreen. I understand the sunscreen is not used for treatment of an injury or illness. I give permission for Girls Inc. staff to apply the sunscreen if necessary. The sunscreen is approved by the FDA for over-the-counter use.

Initials _____

BUG REPELLENT CONSENT: I give permission for my daughter to have insect repellent at camp. I give permission for Girls Inc. staff to apply the insect repellent if necessary. I understand my daughter will not carry the insect repellent themselves, the insect repellent will be given to and be under the control of Girls Inc. staff.

Initials _____

I have read and answered all information to the best of my knowledge.

Signature of Parent/Guardian: _____ Date: _____

This is not a school sponsored event. The City School District of Schenectady is not responsible or liable for any problems or damages arising from participation in this activity. Approval for distribution of these materials does not imply endorsement by the school district.

INTERNET CONTRACT

At Girls Inc., we encourage the use of the Internet via supplied computers, laptops, and tablets for exploration, education and fun. However, we are concerned with the safety and access to websites which may be inappropriate. We make every attempt to supervise all girls while they utilize our technology, and have established a set of specific rules of conduct which the member must read and agree to while at Girls Inc.

I will:

- use the computers only for exploration, education, and fun while visiting only constructive and lawful sites.
- use the computers to view, download, send, print, and display material that are respectful, constructive, and honorable.
- use decent proper language, and observe proper netiquette.
- treat others with respect.
- use only authorized software on the computers.
- get permission before I change, copy, rename, delete, or otherwise access file or software that are not my own creation.
- honor and accept all copyright laws.
- keep my individual password confidential, and not give it out to others.
- ask for permission to go on a website that is not listed on the Girls Inc OK Sites list or web board before accessing the site.

I will NOT:

- damage, disable, or interfere with the operation of computers, computer systems, software or related equipment through physical action or by electronic means.
- reveal personal information about myself or of other members or friends while on the internet, for example, names, home addresses, telephone numbers.
- use chat rooms at any time because they are unsafe.
- access any website where I do not meet the age requirement set forth by that website, if I do meet the requirement I will have an appropriate permission slip signed by my parent/guardian to use.
- post pictures of myself, friends, or others taken at Girls Inc. to any website.

I _____ have read and agree to follow the ***Girls Inc. Internet Rules.***
(Girl's Name)

I _____, as parent/legal guardian have read these rules and discussed them with my daughter. I agree that my daughter may have access to the Girls Inc. technology and I agree to the Internet Contract.

Date: _____ Signature: _____

PLEASE HAND IN WITH APPLICATION

S.M.A.R.T. CONTRACT

As a member of Girls Inc., I agree to be **S.M.A.R.T.**:

S Strong, smart and bold

I am in control of my own destiny.

M My personal best

I agree to do my personal best in everything I do.

A Academics

I know that my education is important and I agree to ask for help when I need it.

R Respect

I agree to show and give respect by treating others as I want to be treated.

T Take responsibility for my own actions

I agree that by not yelling, cursing, hitting, name calling, and putting down my peers that I show and give respect.

Parent/Guardian **S.M.A.R.T. Contract:**

To ensure a safe environment and quality programming, we ask you, as a parent/guardian of a Girls Inc. member, to sign the following contract indicating that you and your child understand and agree to the guidelines of the **S.M.A.R.T. Contract**.

I agree to support the **S.M.A.R.T. Contract**.

If my child does not uphold the guidelines of the **S.M.A.R.T. Contract** she may be suspended or lose her membership.

Girls Inc. Member Name & Signature

Date

Parent/Guardian Name & Signature

Date

By initialing I acknowledge:

____ The Department of Health's Parent/Guardian Rights.

____ That there are no refunds.

____ That Girls Inc does not allow for daily rates.

____ That I must pay by the Friday before each session. If my child is dropped off and Girls Inc does not have payment I will be called to come and pick her up.

____ That if she is dropped off *prior* to 9:00am there is a \$5.00 fee and that she must be picked up *by* 5:00pm or there will be a late fee.

____ Each week there is a \$5.00 field trip fee in addition to weekly registration fee.

PLEASE HAND IN WITH APPLICATION