

Presented
by:



2017 Girlstart Summer Program Registration Form

Girlstart and Waltham Boys and Girls Club are hosting a week-long 'Under the Sea' Summer Program, **July 17-21** for 3rd-4th grade girls in 2016-2017. **Girlstart's mission is to increase girls' interest and engagement in science, technology, engineering, and math (STEM).** Founded in Austin, Texas, in 1997, Girlstart is one of the few community-based informal education programs in the nation specifically dedicated to empowering and equipping K-12 girls in STEM. Thanks to generous support from NASA and Dell, several communities across the nation will receive Girlstart's recognized Summer Program program. Local funding from MilliporeSigma has made it possible for us to bring this program to your community for the first time this year. In 2016, Girlstart's Summer Programs reached over 750 girls in Austin as well as our 'to Go' Programs in Texas, California, Illinois, and Washington. For more information about Girlstart, visit www.girlstart.org.

Please complete this form and submit payment to register your daughter for 'Under the Sea' Summer Program. The program is for 35 girls only, so the **FIRST 35** returned registration forms and payment will be accepted into the program. To be eligible for this opportunity, this form and payment must be submitted by **July 14th**. Return forms to **Waltham Boys and Girls Club (781.893.6620)**. Registration for Girlstart's Summer Program is handled and organized by the Waltham Boys and Girls Club, please direct all questions regarding the program to them.

Please print all information carefully.

*****Please follow STEP 1- 3 to complete your registration*****

STEP ONE: REGISTRATION INFORMATION

'Under the Sea' Summer Program: July 17-21
(3rd and 4th graders in 2016-2017)

Waltham Boys and Girls Clubs
20 Exchange Street
Waltham, MA 02451

9:00am-4:00pm (breakfast will be served from 7:30-8:45am; drop off between 7:30-9:00am; pick up from 4:00-4:30pm)



Student First Name: _____ Student Last Name: _____

Age: _____ Date of Birth (MM/DD/YYYY): _____

School: _____ Grade during 2016-2017 school year: 3 4 5

Please circle student's t-shirt size: Youth Medium Adult Small Adult Medium Adult Large Adult XL

Parent First Name: _____ Parent Last Name: _____

Parent Email Address: _____

Employer: _____ Position: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

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

How did you hear about Summer Program? (please be specific) _____

For reporting purposes, please indicate your student's ethnicity: (optional)

___ African American ___ Asian-American ___ Caucasian
___ Latina/Hispanic ___ Native American ___ Other, please state _____

Is your daughter receiving free or reduced lunch at school? Yes No

Primary Language Spoken in your home: English Spanish Other _____

If/when your daughter attends college, would she be the first in your family to attend college? Yes No

Highest Level of Parent Education: Up to 8th grade Some High School High School Graduate
Some College College Graduate Masters or PhD Degree

All known food and/or drug allergies: _____

Any medical conditions or learning disabilities of which we should be aware: _____

Please include any medical papers necessary in case of emergency.

Any medications she will be taking while in our care: _____

Non-prescription medication and prescription medication must be signed-in during Program.

☐ STEP TWO: SUMMER PROGRAM AGREEMENT

Girlstart is excited to provide this summer enrichment opportunity for your child! To ensure that each and every participant has a great week, we want all of our participants and parents to understand and be familiar with the expectations for this week. Please read and sign below.

- ✓ I will cooperate with my counselors and fellow participants in all summer program activities.
- ✓ I will be responsible for my actions and behavior so that it doesn't interfere with somebody else's opportunity to enjoy the summer program.
- ✓ I will act and speak positively and kindly to all participants and staff (i.e., no swearing, inappropriate remarks, etc.)
- ✓ I will listen and not talk when others are talking because I want them to do the same for me.
- ✓ I will have FUN, make FRIENDS and LEARN new things all week long!
- ✓ I will attend Monday through Friday from 9:00am-4:00pm.
- ✓ I understand drop off is between 8:30-9:00am.
- ✓ I understand pick up is between 4:00-4:30pm.
- ✓ I understand breakfast (served from 7:30-8:45am) and lunch will be provided daily.
- ✓ I will encourage my family to attend the Parent Showcase on Friday, July 21 between 3:00-4:00pm.

Parent Signature

Daughter Signature

☐ STEP THREE: PERMISSION FORM

My daughter/ward, _____, has my permission to participate in the Girlstart Summer Program in Waltham, MA.

I understand that as a part of Girlstart, my daughter/ward may be videotaped, audiotaped, interviewed, and/or photographed and agree to allow Girlstart to keep, as Girlstart's property, the products of such videotaping, audio taping, interviewing, and/or photographing and I agree that such material, along with my child's name may be used, and posted on the Girlstart Website, for promoting the Girlstart program and in any publicity generated by Girlstart. I also understand that my daughter/ward may be asked to do or participate in projects that may also be used by Girlstart for publication in a variety of forums including the Girlstart newsletter, website, and other publications, and that no compensation will be paid for such use.

I understand that by participating in Girlstart, my daughter/ward becomes part of a program/study concerning girls and their attitudes toward math and science. I hereby grant permission for my daughter/ward to participate in this program/study. I further understand that Girlstart will only release the information in accordance with Girlstart policies and procedures.

I understand that participating in Girlstart allows my daughter/ward no special rights or expectations regarding Girlstart, including the right to sue any party involved in the implementation and execution of the Girlstart programs. I agree to hold harmless Girlstart, their agents and employees from all claims, damages, losses, injuries and expenses arising out of or resulting from participation in these activities. I further agree not to sue Girlstart, their agents and employees for any actions or causes of action, including the negligence of Girlstart arising out of participation in this program.

Parent/Guardian Signature

Date

During the hours that Girlstart is in session, I, _____, can be reached at _____(cell) or _____(home). If I cannot be reached in the event of an emergency, the following adults are authorized to act in my behalf:

Name: _____ **Relationship to girl:** _____

Home Phone: _____ **Work Phone:** _____ **Cell Phone:** _____