

Office Only: Paid _____ (Date)

Scholarship _____ yes or _____ no

**Girls Incorporated of Johnson County
Summer Program Enrollment**

Member Name _____ Date of Birth _____

School _____ Grade (next school year) _____

Home Street Address _____ City _____ Zip _____

Township: _____

Circle One: (Youth T – Shirt Size) Small Medium Large (Adult T-shirt Size) Small Medium Large XL XXL
Extra T-shirts for sale through 5/21/2024 for \$10.00 due at registration. How many extra t-shirts would you like? _____

Parent/Guardian Information

1. Primary Guardian _____ Relationship _____
Day Phone () _____ Evening Phone () _____
Cell () _____ Employer: _____
Email Address: _____

2. Other Primary Guardian _____ Relationship _____
Day Phone () _____ Evening Phone () _____
Cell () _____ Employer: _____
Email Address: _____

**Girls Incorporated of Johnson County
AUTHORIZED PICK UP FORM**

- I authorize the following people to pick up and sign out my daughter from Girls Inc. of Johnson County by 6:00PM on any given day.
- I understand that any person who tries to pick my daughter up from the program who is not on this list will not be able to take my daughter with them and we will call you to get a verbal authorization.
- I understand that my daughter must be picked up **promptly by 6:00pm.**
- I understand that if my daughter is not picked up at 6:00pm, Girls Inc. staff will call the names listed below in the order that they are listed. If she is picked up late repeatedly, her position in the program may be in jeopardy.
- Please make sure you have a backup plan for extenuating circumstances. A late pick up fee of \$1.00 per minute is charged if your child is not picked up by 6:00 p.m.
- If the person who shows up to pick up your child appears to be under the influence of drugs or alcohol your child will not be released to them. We will contact the next authorized person on the pick up list or if necessary the police in the event of a safety concern.

*Individuals authorized to pick up (members name) _____ :

NAME	PHONE
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____

Parent Signature _____	Date _____
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*If an individual, under age 18, is authorized to pick up your child, please complete the following:
I authorize _____, age _____ to pick up my child and hereby (name) release Girls Inc. of any liability, loss, or claim which may occur in transporting and/or walking my child from the Girls Inc. of Johnson County.

Parent/Guardian Signature _____	Date _____
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Girls Inc. of Johnson County – Pool Permission Slip

My daughter _____ will be allowed to swim at Franklin Pool. We are no longer limiting activities if your child can swim independently. If she does not follow the rules she may lose the privilege to return to the pool on the next visit or indefinitely. The pool is a privilege. Misbehaving or not following rules will result in consequences.

Can your child swim independently? _____ Yes (fully utilize pool facilities) _____ No (If no, your child **MUST** wear a life jacket at all times, unless in Splash Zone and can **NOT** go out of 3ft. of water)

Parent Signature

Date

Thank you for providing the following information, which is collected solely for reporting to Girls Inc.'s funders such as the United Way and Girls Inc. National. This information will be kept anonymous.

Participant Age

0- 5 years _____
6-8 _____
9-11 _____
12-14 _____
15-18 _____
19-25 _____
25 and over _____

Participant Race/Ethnicity (check only one line)

Multi-Ethnic _____
African American _____
Asian American _____
Caucasian _____
Filipina _____
Latina _____
Middle Eastern _____
Native American _____
Pacific Islander _____
Other, please indicate _____

Participant Residency

Franklin _____
Whiteland _____
New Whiteland _____
Greenwood _____
Bargersville _____
Trafalgar _____
Edinburgh _____
Nineveh _____
Other _____

Annual Household Income

Less than \$10,000 _____
\$10,001-15,000 _____
\$15,001-20,000 _____
\$20,001-25,000 _____
\$25,001-30,000 _____
\$30,001-40,000 _____
\$40,001-50,000 _____
\$50,000-60,000 _____
\$60,001-70,000 _____
\$70,001-80,000 _____
Over \$80,000 _____

Participant Ethnicity

Hispanic / Latina _____
Not Hispanic / Latina _____

Are you a Military Family? _____

Do you receive any of the following?

Medicaid _____
TANF _____
Food Stamps _____
General Assistance _____
SSDI _____
SSI _____
Veteran Comp. _____
Other Gov't Assist. _____

Does your child have IEP / Diagnosis

_____ Yes _____ No
If yes, please explain: _____
Do they have a behavior plan/coach? _____

Is there anything we should know to better Meet her needs? _____

Primary Language Spoken at Home:

Total # of People Living in Household: _____
Does the Participant qualify for:
Free Lunch _____
Reduced Lunch _____
Neither _____

Participant Lives With

Two Parents _____
Parent/ Step Parent _____
Mother Only _____
Father Only _____
Shared/Joint Custody _____
Foster Parent _____
Grandparents _____

**Girls Incorporated® of Johnson County
Medical and Emergency Information
Medical Care Authorization**

Member Name _____ Date of Birth _____

Address _____ City _____ Zip _____

School _____ Grade _____

Parent/Guardian Information

1) Primary Guardian _____ Relationship _____

Day Phone () _____ Evening Phone () _____

Cell () _____ Email: _____

2) Other Primary Guardian _____ Relationship _____

Day Phone () _____ Evening Phone () _____

Cell Phone () _____

Emergency Contact

Person to notify in case of emergency (if parent/guardian cannot be reached)

#1 Name _____ Relationship _____

Day Phone () _____ Evening Phone () _____

Cell Phone/Pager () _____

#2 Name _____ Relationship _____

Day Phone () _____ Evening Phone () _____

Cell Phone/Pager () _____

Doctor/Dentist Information

Doctor and dentist to be called in case of emergency

Doctor _____ Phone () _____

Dentist _____ Phone () _____

Medical Insurance/Health Care Provider _____

Member or Policy Number _____

Medical/Health Information

Does member have allergies to specific medications:

- Yes If yes, please specify _____
- No

Does member have allergies to specific foods:

- Yes If yes, please specify: _____
- No

Does member have allergies to insect bites:

- Yes If yes, please specify: _____
- No

List any medication(s) taken daily by participant:

Does participant administer the medication herself? _____

Girls Inc. staff may give my daughter Tylenol or Ibuprofen, Pepto, neosporin as needed:

- Yes If yes, specify dosage allowed: _____
- No

Girls Inc.. staff member may spray my daughter with bug spray, which may contain DEET? _____ yes _____ no

Does member have any chronic or recurring illness, such as asthma?

List any other health issues/medical conditions we should know about, such as car sickness, nose bleeds or heat sensitivity:

Are there any activities your daughter should not participate in? Please explain: _____

Is there anything else we should know about your child? _____

In the event of any injury or accident, I authorize emergency medical treatment for my daughter when I cannot be immediately contacted.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Name (Please print) _____

Girls Inc. of Johnson County

Liability Agreement Release and Medical Care Authorization

I hereby authorize, as parent or legal guardian, for _____ (child's name) to participate in Girls Inc. Programs. In consideration for this participation, I do hereby, for myself and my heirs and assigns, release and agree to indemnify and hold harmless Girls Inc. of Johnson County, its employees, and volunteers from all liability, loss, claim, demand, action or cause of action which arises or may arise or be occasioned in any way by such participation. I also release and hold harmless Girls Inc. of Johnson County, its employees and volunteers from all liability, loss, or claim which may occur in transporting my child for the purposes of participating in any Girls Inc. activity.

In the event of any injury or accident, I authorize emergency medical treatment for my child when I cannot be immediately contacted.

Parent / Guardian Signature: _____ Date: _____

Media / Photo Release

(general)

I, _____ hereby authorize Girls Inc. of Johnson County, Girls Inc. National, and its agents, and others working for it or on its behalf to use my daughter's image/likeness/voice in still photos, slides, video productions, radio coverage, television coverage, interviews, testimonials and/or any other media for the purpose of promoting and representing Girls Inc. and its programs, and do hereby grant and convey unto Girls Inc. all rights, title, and interest in the above media including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.

Parent/Guardian Signature: _____

Date: _____ Home Phone: _____

Child's Name: _____

Girls Inc. of Johnson County

Acknowledgement of the following:

I (Parent) _____ acknowledge receipt of the Girls Inc. of Johnson County "Parent and Girl Responsibilities" and take responsibility to read and relay them to my child,

I _____ ABOVE NAME _____ acknowledge receipt of the "Girls Inc. of Johnson County Policy Regarding Relational Aggression, Harassment, and Bullying" and take responsibility to read and relay to my child the meaning of this paper.

I _____ ABOVE NAME _____ acknowledge that if my daughter displays negative attitude or disobeys the rules and guidelines for Girls Inc. she may receive a punishment of one of the following; time out, sentences, in/out of Girls Inc. suspension, or in some cases an expulsion from Girls Inc.

Signature

Date

SUMMER PARENT AND GIRL RESPONSIBILITIES

Please read and share with your daughter(s):

**Office
Copy**

Initial below

Girls, Inc.'s summer programs include group activities such as field trips; trips to the Franklin Family Aquatic Center and other outings in the community ("Group Activities"). All girls must be able to function in a group setting and strictly abide by Girls Inc. rules and policies in order to attend such Group Activities. This includes, but is not limited to, displaying appropriate behavior (a) while traveling to the Group Activities, (b) while at the center; (c) during such Group Activities; and/or (d) at events with Girls Inc. Girls Inc. provides 1:15 staff to girl ratio per Girls Inc. National standards as an after school and camp provider. Girls Inc. is not a day care provider. Any violations of Girls Inc. rules or policies or demonstrated inability to appropriately function in a group setting (in the sole discretion of Girls Inc. staff) may result in the suspension of Girls, Inc. privileges which might range from, but not be limited to, prohibition from attendance at Group Activities up to dismissal from the program.

Program Hours: Program hours are **Monday through Friday from 7 a.m. – 6 p.m..**

Late Policy: A late pick up fee of \$1.00 per minute is charged if you do not pick up your daughter by 6:00pm. It is the responsibility of each family to make arrangements for picking up girls **before** the daily closing time. **FAMILIES SHOULD HAVE A BACK UP PLAN IN PLACE.** Because of significant and ongoing problems with late pick-ups, membership may be revoked for girls whose parents are late more than twice during the summer. **No exceptions will be made nor refunds will be issued.** We reserve the right to contact law enforcement or Child Protective Services after 30 minutes past time of pick up.

Respect: At Girls Inc. we strive to treat all staff, girls and parents with respect and courtesy at all times, including using appropriate language, respecting property and equipment and not using verbal or physical aggression towards another person. Should you or your daughter have a recurring problem abiding by these rules, she may be dismissed from the program without refund of payments.

Scanned In/Out: Your daughter must be scanned in every day. She must be scanned out when being picked up by someone listed on the pick-up list. Please be sure that you or anyone else who picks her up has a photo ID. Please notify us immediately if you think someone inappropriate will be trying to pick her up.

Cancellation: **Absolutely no refunds will be given under any circumstance.**

Payments: **Registration fee of \$35.00 is due at registration until 3/22/24 fee increases thereafter**
Full Time Program Fees: \$125/ 7 payments
Part Time Program Fees: \$35 per day

Additional Costs: If you would like to send money for the Pool snack bar. Your child will be responsible if sent with money.

Food: Lunch will be provided on a daily basis from Franklin schools. There will be a calendar posted in the center so that if your daughter does not like what we will be serving on any given day you may send a lunch that doesn't need to be refrigerated or microwaved.

Snack: The afternoon snack will be provided to each member daily at no cost, these snacks will be provided by Franklin schools. Breakfast items will be provided for participants from 7:00 – 9:00 a.m. Breakfast items included (ex. Cereal, granola bars, pop-tarts, etc.)

Health: For the health and well-being of the Girls Inc. community, please do not send your daughter if she is ill or has any contagious condition, conjunctivitis ("pink eye"), head lice, strep, etc. **If your daughter has a temperature of 100.0 degrees or higher, parents will be notified and the child must be picked up as soon as possible. Girls Inc. is not a school, day care or health care provider and therefore does not have a nurse on staff.** If your child requires daily shots or administration of daily medication a health care provider or other designee by the guardian is welcome to provide this need.

Clothing: Our programs focus on fun and "learning through doing." Please send your girl with the appropriate clothing so that she may fully enjoy herself (play clothes that can get wet/and or dirty, and that are not revealing when girls participate in activities).

Personal Belongings: Girls Inc. will not be held responsible for any belongings that your daughter brings and/or leaves on Girls Inc. property. Valuables such as cash, jewelry, toys, electronics, and cell phones are brought in at your own risk. **However theft is not tolerated at Girls Inc. Theft is a cause for suspension or dismissal from the center with no refund of fees.**

Phone Calls: Girls Inc. members are generally not allowed to use phones in the center. If a parent needs to get in touch with her daughter, a staff member will take the call and relay a message to the member, or if you must speak to them we will get them unless they are out of the center.

Confidentiality and Truthfulness of Information: We only share information about your daughter with the staff who works directly with them. In order to ensure that your daughter has the safest, most productive and FUN time in our program, we ask that you be honest when reporting all information about your daughter, so that our staff is able to design and modify programming and other activities to best suit her individual needs to the best extent possible.

Behavior: There is a code of contact / behavior expectations for participation in programs. Please read the Parent Handbook which will be provided.

If the person who shows up to pick up your child appears to be under the influence of drugs or alcohol your child will not be released to them. We will contact the next authorized person on the pick up list or if necessary the police in the event of a safety concern.

Parental/Guardian support and involvement are vital to successful membership at Girls Inc. I have read and understand these policies. By signing the signature page of the membership packet you and your daughter agree to abide by these policies and understand that failure to abide by these policies will result in termination from Girls Inc. We understand that if termination results from violation of the above policies, no deposits and or/advance payments will be returned to us.

Parent Signature _____

Date _____

1/17/2024

Summer Parent & Girl Responsibilities/ Office Copy



of Johnson County

**Girls Inc. of Johnson County
Network and Computer
Acceptable Use Pledge
Grades K-3**

I agree to use Girls Inc. of Johnson County technology carefully, respectfully, and responsibly.

I will follow Girls Inc. of Johnson County rules.

I will protect my privacy, and the privacy of others.

I will be safe on the Internet.

If I do not work safely and responsibly, I may lose my computer privileges.

These expectations have been discussed with me.

I understand these expectations, and I agree to follow them whenever using technology at Girls Inc. of Johnson County.

Name

Date



of Johnson County

Girls Inc. of Johnson County
Network and Computer
Acceptable Use Pledge
Grades 4-6

I Will Respect Myself

I will show respect for myself through my actions. I will only use appropriate language and images on the Internet and in the Girls Inc. of Johnson County learning environment. I will not post inappropriate personal information about my life, experiences or relationships.

I Will Protect Myself

I will ensure that the information I post online will not put me at risk. I will not post my names, address or phone number, a schedule of my activities or inappropriate personal details. I will report any aggressive or inappropriate behavior directed at me. I will not share my password or account details with anyone else.

I Will Respect Others

I will show respect to others. I will not use electronic resources to bully, harass or stalk other people. I will not visit sites that Girls Inc. of Johnson County would deem inappropriate. I will not abuse my access privileges. I will respect my peers and program leaders by not using technology inappropriately.

I Will Protect Others

I will protect others by reporting bullying. I will not forward any materials (including emails and images) that the school would deem inappropriate.

I Will Respect Copyright

I Will use and abide by the fair use rules. I will not install software on devices provided by Girls Inc. of Johnson County. I will not steal music or other media, and I will not distribute these in a manner that violates their licenses.

I Will Respect Technology

I will take all reasonable precautions to protect computer devices from damage. I will not tamper with its software. I will not interfere with Girls Inc. of Johnson County's systems or attempt to bypass assigned network access.

Acceptance

By signing this agreement, I agree to always act in a manner that is respectful to myself and others, and in a way that will represent Girls Inc. of Johnson County in a positive way. I understand that failing to follow the above may lead to loss of these privileges.

Name

Date



of Johnson County

Girls Inc. of Johnson County
Network and Computer
Acceptable Use Pledge
Grades 7-12

Purpose

The purpose of this Acceptable Use Policy is to ensure that girls will benefit from learning opportunities offered by Girls Inc. of Johnson County technology resources in a safe and effective manner. Internet use and access is considered a privilege.

General

- Technology sessions will always be supervised by a program leader. Internet usage will be monitored.
- Girls will participate in Digital Citizenship programming.
- Girls will be aware that any technology usage, including distributing or receiving information, may be monitored for unusual activity, security and network management reasons.
- Girls will treat others with respect at all times and will represent Girls Inc. of Johnson County in a positive way.
- Girls will use technology resources for educational purposes.
- Girls will take all reasonable precautions to protect technology from damage.

Unacceptable Use

- Uploading and downloading of non-approved software
- Intentionally visiting Internet sites that contain obscene, illegal, hateful or otherwise objectionable materials
- Plagiarizing or violating copyright laws
- Disclosing or posting personal information
- Sending or receiving any material that is illegal, obscene, defamatory or that is intended to annoy, bully or intimidate another person
- Sharing their own or other people's personal details, such as addresses or phone numbers, pictures or passwords

Social Media

- *Refer to Social Media Guidelines by the National Office for guidance.*

Acceptance

By signing this agreement, I agree to always act in a manner that is respectful to myself and others, and in a way that will represent Girls Inc. of Johnson County in a positive way. I understand that failing to follow the above may lead to loss of these privileges.

Name

Date

Financial Agreement

Girls Inc. of Johnson County Summer Program Enrollment Financial Agreement

Program Hours 7:00 a.m.– 6:00 p.m.

Financial Terms and Conditions

Child's Name: _____ Child's Grade Next School year: _____

I understand that my tuition is based upon this agreement as completed below. I agree to pay the total tuition designated in this contract. Your account must be paid on time or placement could be jeopardized. **WEEKLY FEES MUST BE PAID EVEN IF YOUR CHILD IS NOT PRESENT. NO REFUNDS.**

Summer Camp runs- **June 3 – July 26, 2024 (closed July 1-5, 2024)**

Please choose **ONE** payment plan that works best for your family:

7 Payments of \$125.00

Payment Schedule:

May 21, 2024

June 3, 2024

June 10, 2024

June 17, 2024

June 24, 2024

July 8, 2024

July 15, 2024

Daily Payments - \$35

What days of the week/ dates will your child attend? _____

I have received, read, and understand the information contained in the Girls Inc. of Johnson County Summer Program Enrollment agreement. I agree to the terms and conditions set forth including fees calculated in this agreement. Dates may be added but dates may **NOT** be removed once contract is signed. **NO REFUNDS WILL BE GIVEN AT ANY TIME.**

Parent Signature: _____ Date: _____

Office Manager Signature: _____ Date: _____

I understand that a late fee of \$1.00 per minute will be assessed after 6:00 pm. Abuse of this policy will result in termination from the program. Parents initial _____

I understand Girls Inc. will be closed on 7/1-5/24. Parents Initial _____

Franklin Pool Rules

Girls Inc. will be walking to the Franklin pool this summer in good weather conditions only. The following are some rules and information about going to the pool:

1. The girls will walk to the pool between 12:30-1:00, see Parent Handbook for your child's swim dates. We will be walking back to the center at 4:00 p.m. and girls will need to be picked up at the center by 6:00 p.m.
2. On pool days, girls need to come dressed for the pool. **Swimsuits must be worn underneath clothes.** We do this to save time when getting ready for the pool.
3. Girls need to **bring their own sunscreen** for the pool.
4. Girls may bring goggles, nose plugs, and a coast guard approved life vest (requirements from Franklin Family Aquatic Center and provided by the pool). They will not be allowed to bring any other kind of pool raft or toy.
5. **Girls Inc. will be providing a snack upon return to the center.** If you would like to send extra money for snack bar purchases you may do that at your own discretion. The Franklin Family Aquatic Center will not allow food to be brought into the pool area. Your child will be responsible for managing her own money. Girls Inc. is not responsible for lost money.
6. **Girls need to bring a bag to store their clothes and other items in while at the pool.** The items they take to the pool are their responsibility. Please express to them the importance of keeping their items in their bags at all times. This saves you time when you arrive to pick them up, and also avoids loss of items.
7. **GIRLS MUST WEAR TENNIS SHOES ON POOL DAYS,** but may bring flip flops or sandals to wear on the pool deck.
8. **GIRLS INC. STAFF AND VOLUNTEERS ARE NOT LICENSED LIFEGUARDS.** We are there to supervise the girls; however the Franklin Family Aquatic Center has trained lifeguards on duty for the safety of our members.



We appreciate your assistance with these rules. Please let me know if you have any additional questions regarding pool days by contacting me @ 317-736-5344 or sydney@girlsincjc.org.

Sydney Stewart, Program Director

Parents Copy – Please keep

GIRLS INC. OF JOHNSON COUNTY

**POLICY REGARDING
RELATIONAL AGGRESSION, HARASSMENT, AND BULLYING**

DEFINITIONS:

1. Relational Aggression (RA): behavior that is intended to harm someone by damaging or manipulating her peers. RA is unacceptable, as it leads to lowered self-esteem, absenteeism, and possibly violence. Examples of RA include, but are not limited to, spreading rumors, gossip, exclusion, taunting, and building social alliances against particular individuals.
2. Harassment: behavior, including any speech or action, which creates a hostile, intimidating or offensive environment.
3. Bullying: written or verbal communication or overt, physical acts or gestures, committed by a member or group of members against another member with the intent to harass, ridicule, humiliate, intimidate, or harm the other member.

POLICY:

Girls Inc. of Johnson County expects that all members will be treated with dignity and respect at all times. Likewise, Girls Inc. of Johnson County expects that all members will treat their peers and the staff with dignity and respect at all times. In addition, Girls Inc. of Johnson County expects all members to practice empathy and inclusion in dealing with one another. These expectations are without regard for an individual's color, ethnicity, national origin, ancestry, gender, sexual orientation, religion, appearance, age, family background, marital status, disability, or position in the agency.

Girls Inc. of Johnson County will not tolerate any behavior intended to degrade, insult, threaten, isolate, ostracize or harm any member or staff member of the agency. Such behavior, whether exhibited as relational aggression, harassment, and bullying, or otherwise, is unacceptable and is grounds for disciplinary action up to, and including, expulsion from services.

Parents Copy – Please keep

SUMMER
PARENT AND GIRL RESPONSIBILITIES

Please read and share with your daughter(s):

**Parent
Copy**

Initial below

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Respect: At Girls Inc. we strive to treat all staff, girls and parents with respect and courtesy at all times, including using appropriate language, respecting property and equipment and not using verbal or physical aggression towards another person. Should you or your daughter have a recurring problem abiding by these rules, she may be dismissed from the program without refund of payments.

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Parent Signature

Date