



**MANY ARE THE PLANS IN A MAN'S HEART, BUT IT IS THE LORD'S PURPOSE THAT PREVAILS.  
PROVERBS 19:21 (NLT)**

**AFTERSCHOOL DATES: AUGUST 23, 2021 – JUNE 8, 2022  
PARENT ORIENTATION: SATURDAY, AUGUST 21, 2021 @ 10:00AM**

Dear Parents:

Thank you for your interest in our Girls with Purpose After School Program. Girls with Purpose Afterschool Program offers a structure and nurturing environment filled with exceptional female mentors dedicated to helping our girls excel academically and socially. We provide age appropriate activities that develops social skills and decision making. We pair academic support with fun and exciting activities that builds happy and healthy girls. All activities, workshops, discussions, and invited special guests are designed to inspire, motivate, and push our girls toward a PURPOSE DRIVEN LIFE. GWP will be fun, but yet rewarding. Girls with Purpose is not your typical afterschool program.

### **APPLICATION PROCESS:**

Please read the following carefully. *GWP Afterschool enrollment is first come, first served.* If you prefer to apply online, you can find a link to our online application at [www.girlsoftransformation.com](http://www.girlsoftransformation.com). To apply by mail, please send us the **GWP Afterschool Program Application, Financial Aid Assistance Application** (if applicable), and the **\$35 non-refundable registration fee**. We will notify each applicant regarding enrollment status as soon as possible, typically within two weeks of receiving your complete application. Once the student is enrolled, we will send you a confirmation email and the **return paperwork packet**. *IMPORTANT: If you don't hear from us within two weeks of submitting your application, it may be incomplete; please contact us to find out what is missing.*

### **PROGRAM COST:**

GWP Afterschool Program is \$60.00 weekly. There's a one-time \$35 non-refundable registration fee (due with application). Program weekly fee are due on Friday's in the form of cash, money orders, cashier checks, or you can pay online. **NO CHECKS**. Late fee will be assessed of \$10.00 if not collected by Friday. If program fee not received by Monday, student will not be able to attend the afterschool program on Tuesday unless both program fee and late fee are paid.

### **TRANSPORTATION:**

Transportation for local Miami Gardens residence is \$30.00 weekly. We do not provide transportation outside of the Miami Gardens area. **Transportation will ONLY pick students up from school and to the GWP Afterschool Program**. Parents must pick girls up on or before 6:00pm. Transportation monies are due on Friday's in the form of cash, money orders, cashier checks, or you can pay online. **NO CHECKS**.

Late fee will be assessed of \$10.00 if not collected by Friday. If transportation fee not received by Monday, students will not be picked up on Tuesday unless transportation fee is paid.

### **AFTERCARE:**

Aftercare hours are from 2:00pm-6:00pm.

### **SNACK:**

Students will receive snack during the GWP Afterschool Program.

### **AFTERSCHOOL PROGRAM SITE:**

Girls with Purpose After School Program is located at 17090 NW 7<sup>th</sup> Avenue, #106, Miami Gardens, Florida 33169.

### **CONTACT INFORMATION:**

**Mailing & Physical Location:** 17090 NW 7<sup>th</sup> Avenue,  
#106

Miami Gardens, Florida 33169

**Website:** [www.girlsoftransformation.com](http://www.girlsoftransformation.com)

**Email:** [afterschool@girlsoftransformation.com](mailto:afterschool@girlsoftransformation.com)

**Office:** (305) 493-4085

**Fax:** (305) 493-4085

**IMPORTANT: SEND all documents to our mailing address, email, or fax. You can submit all applications and supporting documents online at our website.**

### **WHEN TO SHOW UP AND WHAT TO BRING:**

GWP Afterschool Program starts Monday, August 23, 2021. The afterschool hours are Monday-Friday from 2:00-6:00pm. Girls will receive snack during afterschool program. All necessary supplies will be provided. Please note, if girls choose to bring her own personal games or cell phone, GWP Staff won't be responsible if lost or damaged.

### **COMPLETING YOUR APPLICATION:**

#### **Include the following:**

- ☐ GWP After School Program Application
- ☐ \$35 non-refundable registration fee only
- ☐ Financial Aid application (if applicable)
- ☐ All requested documents for financial aid support (if applicable)

#### **Send to either:**

**Mail:** Girls of Transformation Mentoring Program, Inc.  
ATTN: GIRLS WITH PURPOSE AFTERSCHOOL PROGRAM

17090 NW 7<sup>th</sup> Avenue, #106  
Miami Gardens, Florida 33169

**Website:** [www.girlsoftransformation.com](http://www.girlsoftransformation.com) (Online Application)

**Email:** [aftercare@girlsoftransformation.com](mailto:aftercare@girlsoftransformation.com)

**Office:** (305) 493-4085

**Fax:** (305) 974-2040

#### **Money Orders or Cashier Checks should be made payable to:**

Girls of Transformation Mentoring Program, Inc.

**Please do NOT send transportation money at this time. Transportation money is due on the day of the MANDATORY PARENT ORIENTATION Saturday, August 21, 2021, at 10:00am.**

### **IMPORTANT INFORMATION FOR ALL SESSIONS:**

<b>Applications</b> available now -- open until full.	<i>Financial assistance and transportation is limited and is first come, first served – apply as soon as possible.</i>
<b>Enrollment notification and return paperwork</b> packet sent.	Two weeks after we receive your complete application via email.

<b>Transportation Fee</b> can be paid in full or on a weekly basis.	First week transportation fee is due on or before Friday, August 20, 2021 (no exceptions). Weekly transportation is due on Friday's (no exceptions).
<b>Return paperwork</b> packets due...	Two weeks before the first day of the Afterschool Program.

### **REFUNDS:**

\$35 Registration Fee is non-refundable. There are NO refunds are roll over of program fee and transportation fee unless students attend program and/or use transportation for two days or less.

### **LATE FEE (PROGRAM & TRANSPORTATION):**

All weekly program and transportation fee are due on Friday's (NO EXCEPTION). After Friday there will be a \$10.00 late fee added to your account. If program and transportation fee not collected by Monday student will not be picked up and cannot attend the afterschool program on Tuesday.

### **LATE FEE (PICK-UP):**

GWP After School Program is from 2:00-6:00pm. At 6:04pm you will incur a \$10.00 late fee every 15 minutes you're late. The late fee will be due prior to the student starting the next week. If late fee not collected students will not be able to attend afterschool program until late fees are paid. Please be on time.

### **METHOD OF PAYMENTS:**

Method of payments accepted are debit, credit, cash, money order, or cashier check. NO CHECKS.

Thank you so much for your interest in our Girls with Purpose After School Program where we believe EVERYONE is created for a PURPOSE. If you have any further questions, please feel free to contact our administrative office via phone or email. We look forward to working with your daughters.

Warmest Regards,

*Sonya Woodard*

Sonya Woodard  
Executive Director



# Girls with Purpose After School Program

## Registration Application

(Thanks for printing legibly or typing)

AFTERSCHOOL DATES: AUGUST 23, 2021 – JUNE 8, 2022

PARENT ORIENTATION: SATURDAY, AUGUST 21, 2021 @ 10:00AM

### MENTEE AND PRIMARY CONTACT INFORMATION:

Name of Student: _____	Date of Birth: _____	Age: _____
Name you prefer to be called (if different): _____		Gender: ( ) Male ( ) Female
Social Security: _____		
Name of School: _____		Grade: _____
T-Shirt Size (circle one): <b>Youth:</b> SMALL MEDIUM LARGE <i>or</i> <b>Adult:</b> SMALL MEDIUM LARGE XL XXL		
Mother/Guardian: _____		
Mailing Address: _____		
City: _____	State: _____	Zip Code: _____
Home Phone: _____	Mobile Phone: _____	Work Phone: _____
Email address you check frequently: _____		
Father/Guardian: _____		
Mailing Address: _____		
City: _____	State: _____	Zip Code: _____
Home Phone: _____	Mobile Phone: _____	Work Phone: _____
Email address you check frequently: _____		
Best way to contact you? (circle one) <b>Home Phone</b> <b>Mobile Phone</b> <b>Email</b> <b>Mail</b>		
<input type="checkbox"/> Please send my paperwork via US mail <i>or</i> <input type="checkbox"/> Please send my paperwork via email		

### EMERGENCY CONTACT/AUTHORIZATION PICKUP:

The student will be released only to the custodial parent or legal guardian and the persons listed below must be 18 years old. The following adults listed below will be contacted and authorized to pickup the student from the afterschool program in case of illness, accident, or emergency, if for some reason the custodial parent or legal guardian cannot be reached.

#### Emergency Contact #1:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Mobile Phone \_\_\_\_\_ Relation to Child \_\_\_\_\_

#### Emergency Contact #2:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Mobile Phone \_\_\_\_\_ Relation to Child \_\_\_\_\_

#### Emergency Contact #3:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Mobile Phone \_\_\_\_\_ Relation to Child \_\_\_\_\_

*I hereby grant permission for GWP Staff to contact the following medical personnel to obtain emergency medical care if needed.*

Hospital Preference\_\_\_\_\_

Yes/No  
Yes/No

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I understand that I will be notified in the case of a medical emergency involving my child. In the event that I cannot be reached, I authorize the calling of a doctor and the providing of necessary medical services in the event my child is injured or becomes ill.

Parent's/Guardian's Initials \_\_\_\_\_

I understand that the Girls with Purpose After School Program will not be responsible for the medical expenses incurred, but that such expenses will be my responsibility as parent/guardian.

Parent's/Guardian's Initials \_\_\_\_\_

**Photo Release** - I hereby give permission for my child to be photographed during the **2021/2022 Girls with Purpose After School Program**. I understand the photos will be used to keep a journal of activities, to share during power point presentations and/or reports to our donors and for promotional purposes including flyers, brochures, newspaper, social media, and website. I understand that although my child's photograph may be used for advertising her identity will not be disclosed. I do not expect compensation and all photos are the property of Girls with Purpose After School Program and its affiliates.

Parent's/Guardian's Initials \_\_\_\_\_

Girls with Purpose After School Program and its staff are not responsible for lost or damaged personal property. All scheduled events are subject to change. Students photos and quotes may be used for publicity purposes. In case of an emergency, and if a family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel (i.e. EMT, First Responder, and/or Physician).

Parent's/Guardian's Initials \_\_\_\_\_

*I hereby state that my child is physically and mentally capable of safe participation in the Girls with Purpose Afterschool Program. I assume all risks and hazards incidental to the conduct of this program. I agree that GWP After School Program shall not be responsible for any personal injuries or losses sustained by my child while on any GWP premises, GWP vehicles, or as a result of any GWP sponsored activity. I further hold harmless the GWP After School Program from any claims or demands arising out of any such injuries or losses. I also authorize GWP Staff to obtain medical treatment for my child in the event the parent(s), guardian, or emergency contact cannot be reached. I understand and agree to abide by the policies therein stated. I give permission to the use of photographs of my child/ren in GWP publications and news media and give permission to the above name student to participate in activities, field trips, and to use GWP owned and contracted transportation.*

**Must be 18 years or older  
and be the parent or legal  
guardian to authorize  
registration.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name of Parent/Guardian: \_\_\_\_\_

**Please fill out every section on this application and send your application fee of \$35.00 (non-refundable) to:**

Girls of Transformation Mentoring Program, Inc.

ATTN: GIRLS WITH PURPOSE AFTERSCHOOL PROGRAM

17090 NW 7<sup>th</sup> Avenue, #106

Miami Gardens, Florida 33169

Website: [www.girlsoftransformation.com](http://www.girlsoftransformation.com)

**(application and registration fee can be process online)**

Email: [aftercare@girlsoftransformation.com](mailto:aftercare@girlsoftransformation.com)

Office: (305) 493-4085 Fax: (305) 974-2040



*Many are the plans in a man's heart, but it is The Lord's PURPOSE that prevails.  
Proverbs 19:21 (NLT)*

#### FINANCIAL ASSISTANCE APPLICATION

*Thank you for your interest in the Girls with Purpose After School Program. It is part of our mission to be accessible to students of all financial backgrounds. Our ability to give financial aid is a critical part of ensuring the success of the organization. Applying for financial aid will neither increase nor decrease your chances of getting into a program.*

**Directions:** Fill out the application for each student for whom you are applying for financial assistance. Sign and send in the application with your program application. You may be contacted for a follow-up phone interview. Please allow up to two weeks to process.

#### **Program you are applying financial assistance for:**

- ☐ Girls with Purpose Afterschool Program August 23, 2021 – June 8, 2022
- ☐ Girls with Purpose Summer Mentorship Program June 13 – August 19, 2022

#### **APPLICANT INFORMATION:**

\_\_\_\_\_  
Name of Parent/Guardian

\_\_\_\_\_  
Name of Mentee (applying for assistance)

\_\_\_\_\_  
Address:

\_\_\_\_\_  
Home Number:

\_\_\_\_\_  
City:

\_\_\_\_\_  
State:

\_\_\_\_\_  
Zip Code:

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

#### **EMPLOYER INFORMATION:**

\_\_\_\_\_  
Employer Name

\_\_\_\_\_  
Address:

\_\_\_\_\_  
Work Number:

\_\_\_\_\_  
City:

\_\_\_\_\_  
State:

\_\_\_\_\_  
Zip Code:

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

**ALL PERSON LIVING IN THE HOUSEHOLD:****Parent/Guardian/Adult (over 18):**

Sex	Name (last, first)	Age	Marital Status
_____	_____	_____	_____

Sex	Name (last, first)	Age	Marital Status
_____	_____	_____	_____

**Children in Household (under the age of 18):**

Sex	Name (last, first)	Age	Date of Birth
_____	_____	_____	_____

Sex	Name (last, first)	Age	Date of Birth
_____	_____	_____	_____

Sex	Name (last, first)	Age	Date of Birth
_____	_____	_____	_____

Sex	Name (last, first)	Age	Date of Birth
_____	_____	_____	_____

In order to determine your family eligibility, such documents are requested as proof. Please provide the following documents:

-Driver License or Identification Card for Primary Adult.

-Birth Certificates for all students applying for financial assistance (primary adult must be listed on child/ren birth certificate).

-Proof of all income (check stubs of **ALL** income and/or bank statement if you get direct deposit):

- Paid Weekly (last 4 pay stub)
- Paid Bi-Weekly (last 3 pay stub)
- Paid Monthly (last 2 pay stubs)

*I certify that the above information is true and complete to the best of my knowledge, and I do not have additional income not represented above. I agree, if necessary, to send additional information and documentation to support the above statements. I understand that sponsorship assistance is based on need. In the event, that I cancel my child participation, I will contact GWP Administration immediately, so sponsorship can be provided to others. I understand that if I falsify any of the above information, I can be prosecuted and will never be eligible for any assistance regarding any of our programs.*

**Must be 18 years or older  
and be the parent or legal  
guardian to authorize  
registration.**

Printed Name of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_