

# 2024 REGISTRATION PACKET

Office: (305) 493-4085 Fax: (786) 840-8370

Email: camp@girlsoftransformation.com

Website: www.girlsoftransformation.com/summer-program



MANY ARE THE PLANS IN A MAN'S HEART, BUT IT IS THE LORD'S PURPOSE THAT PREVAILS.

PROVERBS 19:21 (NLT)

SUMMER PROGRAM DATES: JUNE 10 – AUGUST 2, 2024 PARENT ORIENTATION: SATURDAY, JUNE 8, 2024 @ 3:00PM

Dear Parents:

Thank you for your interest in our Girls with Purpose Summer Mentorship Program. Girls with Purpose is an INSPIRED and CREATIVE CHRISTIAN SUMMER PROGRAM designed to groom our girls in various areas to pursue her PURPOSE. All activities, workshops, discussions, field trips, and invited special guests are designed to inspire, motivate, and push our girls toward a PURPOSE DRIVEN LIFE. GWP will be fun, but rewarding. Girls with Purpose is not your typical summer program.

#### **APPLICATION PROCESS:**

The summer program enrollment is first come, first served. If you prefer to apply online, you can find a link to our online application at <a href="www.girlsoftransformaton.com/summer-program">www.girlsoftransformaton.com/summer-program</a>. To apply by mail, please send us the **Summer Program Application** and the **\$50 non-refundable registration fee** (do not pay tuition at this time). We'll notify each applicant via email regarding enrollment status, typically within two weeks of receiving your complete application.

#### **SIGN-IN SHEETS:**

Each parent is required to sign-in and sign-out their daughter when dropping off and picking up. This goes for any person you've designated to pick up and drop off your child.

#### **TUITION:**

The Summer Program weekly cost is \$150.00 plus a \$50 non-refundable application fee (due with application). The tuition fee can be paid weekly, biweekly, monthly, or you can pay for the entire summer. The tuition cost does not include field trips costs, before and after care cost, and transportation cost. Youth attending camp one day or five days, the cost is still \$150.00 weekly. You can make tuition, before and aftercare, transportation, and late fees online. You can also pay in person using a credit or debit card, money order, or cashier check. NO PERSONAL CHECKS.

#### **FIELD TRIPS:**

The field trips fees are <u>due on Thursday's</u> and must be paid in cash. Field trips can be paid any day of the week except Friday's. On Wednesday's the movies start at 9:30am and the movie location is in Davie, please have the youth at the facility by 9:00am. We'll be leaving at 9:05am. Once we leave to go on any field trip, youth cannot be drop to the field trip. The youth can attend the camp once we return to the facility.

#### **TRANSPORTATION:**

Transportation pick-up and drop off for local Miami Gardens residence is \$35.00 weekly. We do provide transportation in certain areas in Broward (please inquire). One way is \$20.00 weekly whether picking up or dropping off. When picking up the youth in the morning, we'll give the youth 3 minutes to come out, after 3 minutes we'll leave to pick up the next youth. Once transportation leave, we do not return to pick up the youth.

#### **BEFORE AND AFTERCARE:**

Before care is 7:00am-9:00am for \$20.00 weekly. Aftercare is 4:00pm-6:00pm for \$20.00 weekly.

#### **BREAKFAST, LUNCH, & SNACK:**

Youth will receive free breakfast, lunch, and snacks.

#### **PROGRAM ATTIRE:**

Youth are expected to wear camp shirts, long or short pants, and closed in shoes. No sandals. Each youth is given one free program shirt. The cost for additional program shirts is \$15.00 (youth size) and \$20.00 (adult size).

#### **SUMMER PROGRAM SITE:**

Girls with Purpose Summer Mentorship Program is located at 17090 NW 7th Avenue, #106 Miami Gardens, Florida 33169.

#### **CONTACT INFORMATION:**

Mailing Address: 17090 NW 7th Avenue, #106

Miami Gardens, Florida 33169

**Physical Location:** 17090 NW 7th Avenue, #106

Miami Gardens, Florida 33169

**Website:** www.girlsoftransformation.com **Email:** camp@girlsoftransformation.com

**Office:** (305) 493-4085 **Fax:** (786) 840-8370

Summer Program Emergency Mobile: (305) 780-6869

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 Summer Program is Monday-Friday from 9:00am-4:00pm. All youth will receive a program-shirt, drawstring bag, bible, folder, note-book, writing utensils, sunscreen, and water bottle. Youth will receive free breakfast, lunch, and one snack. All necessary supplies will be provided. GWP youth are required to wear GWP program shirt everyday with comfortable bottoms of your choice, close-in shoes, and sunscreen (if possible) highly recommended. **NO CELL PHONES ARE ALLOWED**. On Friday's GWP will be allowed to bring their cell phones or any game of their choice. Please note, if youth choose to bring her personal games or cell phone, GWP Staff won't be responsible if it's lost or damaged.

#### **PROGRAM SHIRT:**

Youth will receive one free program shirt. You can order on our website or see our staff to place additional program shirt order. The cost is as followed:

Size: YOUTH: S M L - \$15.00 Size: ADULT: S M L XL \$20.00

#### Send to either:

**Mail:** Girls of Transformation Mentoring Program, Inc. ATTN: GWP SUMMER PROGRAM REGISTRATION 17090 NW 7th Avenue, #106

Miami Gardens, Florida 33169

Website: <a href="mailto:www.girlsoftransformation.com">www.girlsoftransformation.com</a>/summer-program

Email: <a href="mailto:admin@girlsoftransformation.com">admin@girlsoftransformation.com</a>/
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Fax: (786) 840-8370

#### **COMPLETING YOUR APPLICATION:**

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

☐ GWP Summer Program A
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□ \$50 non-refundable registration fee only

#### Cashier Checks and Money Orders should be made payable to:

Girls with Purpose

Please <u>do NOT</u> send tuition in at this time. First tuition payment is due on Saturday, June 8, 2024.

#### **IMPORTANT INFORMATION:**

Applications available	Financial assistance and
March 19, 2024 open	transportation are limited and is
until full.	first come, first served – apply as
	soon as possible.
Enrollment notification	Two weeks after we receive your
and <b>return paperwork</b>	complete application via email.
packet sent.	
<b>Tuition</b> can be paid in full or on a	First week tuition is due on or before
weekly basis.	Saturday, June 8, 2024 (no exceptions).
	Weekly tuition is due on Friday's (no
	exceptions).
Return paperwork packets due	Two weeks before the first day of
	Summer Program.

#### **REFUNDS/CARRYOVERS:**

Registration fees are non-refundable. There're no carryovers.

#### LATE FEE:

All weekly tuition is due on Friday's (**NO EXCEPTIONS**). After Friday there's a \$15.00 late fee added to your account. If tuition and late fees are not paid by Monday, youth will not be able to attend camp until payment is made (**NO EXCEPTIONS**).

#### **LATE PICKUP:**

Please be advised the summer program ends at 4:00pm. There's a \$10.00 late fee assessed to your account every 10 minutes you're late. You'll be given a grace time of 4:04pm. This is not the pick-up time every day. Once you arrive at 4:05pm, you'll be assessed a \$10.00 late fee, 4:15pm additional \$10.00 late fee, 4:25pm additional late fee, and so forth. If you call to say you're running late, you're still late, if you say there's no parking, you're still late, stuck in traffic, you're still late, and so forth. This is the same for 6:00pm pickup.

#### **DISRESPECTFUL BEHAVIOR:**

Disrespectful behavior and rude comments from parents toward our staff, youth, and other parents in the summer program will not be tolerated. Immediate withdrawal of the youth from the program will take place (NO EXCEPTIONS). The rules of the summer program are implemented by the Executive Director. The staff have been trained to follow the direction of the organization policy and procedure. If there's an issue that may arise, please request to speak to the Executive Director Sonya Woodard. This is a family-oriented program and rude/disrespectful behavior is unacceptable and will not be tolerated under any circumstances.

Thank you so much for your interest in the Girls with Purpose Summer Mentorship Program where we believe OUR GIRLS are created for a PURPOSE.
If you have any further questions, please feel free to contact our administrative office via phone (305) 493-4085 or email admin@girlsoftransformation.com. We look forward to working with you and your daughters this summer.



### Girls with Purpose Summer Mentorship Program

## Registration Application (Thanks for printing legibly or typing)

SUMMER PROGRAM DATES: JUNE 10 – AUGUST 2, 2024 PARENT ORIENTATION: SATURDAY, JUNE 8, 2024 @ 3:00PM

#### YOUTH AND PRIMARY CONTACT INFORMATION:

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Name of Youth:	I	Date of Birth:		Age:
Name you prefer to be called (if differen				
Name of School:				Grade:
T-Shirt Size (circle one): Youth: S M M	ED LG or Adult: S	M MED LG XL XXL XXX	L	
Mother/Guardian:				
Mailing Address:				
City:				
Home Phone:	Mobile Phone: _	Wo	ork Phone	
Email address you check frequently:				
Father/Guardian:				
Mailing Address:				
City:				
Home Phone:	Mobile Phone: _	Wo	ork Phone	
Email address you check frequently:				
Best way to contact you? (circle one)	Home Phone	<b>Mobile Phone</b>	Email	Mail
☐ Please send my paperwork via US ma	il <i>or</i> □ Pleas	se send my paperwork via er	nail	
EMERGENCY CONTACT/AU	THORIZATIO	N PICKUP:		
The youth will be released only to the The following people will also be con				
illness, accident, or emergency, if for so				
Emergency Contact #1:				
First Name	Last Name	Home	Phone	
Mobile Phone		_ Relation to Child		
Emongongs Contact #2.				
Emergency Contact #2: First Name	Last Name	Home	Phone	
Mobile Phone				
		_ Relation to diffia		
Emergency Contact #3: First Name	Last Name	Ноте	Phone	
Mobile Phone		_ Relation to Child		
				<b>T</b>

MEDICAL RELEASE INFORMA I hereby grant permission for GWP Staff needed.		connel to obtain emergency medical care i
		ance
Primary Physician		
Phone		
Dentist		
Phone		
Hospital Preference		
Please list any medical concernation Asthma, Seizures).	s, including any requiring main	ntenance medication (i.e. Diabetic,
Medical Problem	Required Treatment	Should paramedic by called? Yes/No Yes/No Yes/No Yes/No Yes/No
Are there any food or environm	ental allergies that we need to	be aware of?
Is your child presently being treat any reason? Yes_ No_ If yes, explain:		
Is your child allergic to any type o Yes_ No_ If yes, explain:		
Does the child have any behaviora	al or emotional issues the staff sh	ould know about?
Yes No If yes, explain:		
Does your child require a special of Yes_ No_ If yes, explain:		
The purpose of the above-listed i medical problem which may in information that we may need to b	nformation is to ensure that me terfere with or alter treatmen e aware of?	edical personnel have details of any it. Is there any additional medica

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 Mentorship Summer 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 **2024 Girls with Purpose Summer Mentorship 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 and on the internet. I understand that although my child's photograph may be used for advertising, his or her identity will not be disclosed, I do not expect compensation and that all photos are the property of Girls with Purpose Mentorship Summer Camp and its affiliates.

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

Girls with Purpose Mentorship Summer Program and its staff are not responsible for lost or damaged personal property. All scheduled events are subject to change. Children's' 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	
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I hereby state that my child is physically and mentally capable of safe participation in GWP Programs. I assume all risks and hazards incidental to the conduct of this program. I agree that GWP Mentorship 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 Mentorship Program from any claims or demands arising out of any such injuries or losses. I also authorize GWP 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 also give permission to the use of photographs of my children in GWP publications and news media and give permission to the above name child 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:	

To complete your application; please send the \$50.00 refundable registration fee to:

Girls of Transformation Mentoring Program, Inc. ATTN: GWP SUMMER PROGRAM REGISTRATION 17090 NW 7th Avenue, #106
Miami Gardens, Florida 33169

Website: www.girlsoftransformation.com/summer-progarm (application and registration fee can be process online)
Email: admin@girlsoftransformation.com

Office: (305) 493-4085 Fax: (786) 840-8370