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| Church Use Only | Summer Fee: <input type="checkbox"/> \$20 paid <input type="checkbox"/> partial \$ _____ <input type="checkbox"/> waived |
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PRIORITY DEADLINE: MAY 15TH
 Return to: **Cumberland United Methodist Church**
219 N Muessing St
(317) 894-3454

Summer 2019 Registration Form
 Entire form should be completed to register.

CHILD INFORMATION

Has this child attended a Project Transformation Program in the past? Yes No
 If so, previous location attended: _____

| | | | |
|---|------------------------|---------------------------|---------------------------|
| First Name: | | Last Name: | |
| Gender: <input type="checkbox"/> M <input type="checkbox"/> F | Birthday (MM/DD/YYYY): | | Grade (as of Sept. 2019): |
| Home Street Address: | | | |
| City: | County: | State: | Zip: |
| School District: | School: | Church: | |
| Ethnicity: <input type="checkbox"/> HISPANIC/LATINO <input type="checkbox"/> NOT HISPANIC/LATINO | Race: | Primary Language: | |
| Monthly Household income: \$ | | # of People in Household: | |

Child qualifies for government assistance (food stamps, Medicaid, or free/ reduced meal program etc.) Yes No

CHILD HEALTH INFORMATION

Please provide information about your child's health conditions or medications, if none please write N/A

Health Conditions: _____
 Allergies (food, medication, or environmental): _____
 Medications taken: _____
(Project Transformation staff will not administer medications during camp, but a parent/garden is welcome to come and give their camper medicine during the day)

PARENT/GUARDIAN INFORMATION

| | |
|--------------------|---------|
| First & Last Name: | |
| Cell #: | Work #: |
| Home #: | Email: |

EMERGENCY CONTACT INFORMATION

List names (first and last) of **all adults**, other than parent/guardian who can pick up child from program: _____

List the names of **2 adults other than the parent/guardian above** to contact in case of emergency

| | |
|-----------------------------|----------|
| Emergency Contact #1 | |
| First & Last Name: | |
| Relationship: | Phone #: |
| Emergency Contact #2 | |
| First & Last Name: | |
| Relationship: | Phone #: |

PARENT/GUARDIAN SIGNATURE _____ DATE _____



Summer 2019 Registration

Consents & Waivers for Elementary Participants

GENERAL PROGRAM POLICIES and ACTIVITIES

- I understand that my child should attend the program on a daily basis from start to finish. He/she should arrive at the program Monday through Thursday at 9:00am and stay until 3:00pm every day. I understand that picking up my child early on a regular basis does not allow my child to experience all the important aspects of the program.
- I understand that my child will be expected to participate in reading assessments, educational activities, healthy living lessons, physical activities, and art enrichment. I understand there is a no cell phone policy for participants during programming time.
- I understand Project Transformation is not able to give my child/youth medication. However, my child/youth may bring his/her inhaler for asthma or his/her EpiPen for severe allergies if I write a note to the program. I will be called if my child becomes ill.
- I understand Project Transformation is committed to providing a safe and positive learning environment. My child is expected to act respectfully towards others and site property. I understand that disrespect, inappropriate language, fighting, bullying, or damaging property will not be tolerated. If my child does not follow the discipline policies of Project Transformation he/she will be suspended or expelled from the program.
- I agree to provide current working phone numbers where I can be reached during program hours. I will also provide two other emergency contact numbers. I understand that a parent/guardian or emergency contact must be available for my child at all times.

TRANSPORTATION POLICY

- If my child chooses to willfully leave the premises during program hours or to not attend the program, Project Transformation and/or the site church cannot be and are not responsible for my child/youth's safety, well-being, or behavior.
- I will not hold Project Transformation, the site church, or any and all employees, owners, members, officers, agents, representatives, or subsidiaries of any of them, responsible for the actions, safety, or well-being of my child before he/she checks into the program or after he/she has checked out of the program each day.
- I hereby take full responsibility for my child's whereabouts and actions before and after he/she checks into the program. Thereby, I release and discharge Project Transformation, the site church, or any and all employees, owners, members, officers, agents, representatives, or subsidiaries of any and all claims arising in any way from actions, events, or omissions occurring before my child is checked in and after my child is checked out of the program each day.
- I understand that Project Transformation does not provide transportation to or from program. This is the sole responsibility of the parent/guardian. Please choose from the following options:
 - I will drop off and pick up my child every day.
 - I have arranged for someone else to drop off and pick up my child every day.
 - I have instructed my child to walk to and from the program every day. I will make arrangements for my child to be picked up in case of emergency or inclement weather.

Respond yes or no:

___Emergency Treatment: I hereby give consent for Project Transformation to seek medical treatment for child in an emergency.

___Reading Program: I hereby give consent for Project Transformation to track my child's reading progress during the summer.

___Healthy Habits Program: I hereby give consent for my child to participate in daily recreation and physical activity.

___Water Activities: I hereby give consent for my child to participate in water activities, including swimming and water games.

___Field Trips: I hereby give my consent for my child to participate in field trips and to be transported/supervised by staff or volunteers during.

___Picture/Name Release: I hereby give consent for my child's picture and name to be used for Project Transformation program and its partner organizations/churches promotional purposes.

___Church Contact: I hereby give consent for the site church to use the address on this form to send correspondence regarding church events.

___I understand that Project Transformation programs are located on the premises of partner churches. Project Transformation sites are not licensed by the state as day care or child care facilities.

As the parent/guardian of _____, I agree to support the purposes and policies of Project Transformation.

PARENT/GUARDIAN SIGNATURE _____ DATE _____

How did you hear about the Project Transformation program? _____



Summer 2019 Registration Parent Information

Located at: **Cumberland
United Methodist Church**
219 N Muessing St
(317) 894-3454

Summer Program: Monday through Thursday; 9am to 3pm
There is NO program on Fridays!

IMPORTANT DATES:

First day of program: Monday, June 10th

Family Fun Night: Thursday, June 27th at 6pm (families are invited, includes dinner)

Thursday, July 4th: No Program

Family Fun Night: Thursday, July 25th at 6pm (families are invited, includes dinner)

Last day of program: Tuesday, July 30th

Who can register for the program?

Registration is prioritized for children who qualify for free/reduced school lunches, have a neighboring zip code to the church, and will attend 1st – 6th grades as of fall 2019. We DO NOT accept kids starting Kindergarten in the fall as our reading program is not designed for this age. Registration will not be discriminated against because of race, color, national origin, sex, age, disability, religion, or political belief.

Emergency Contact Numbers

Parents/guardians must provide a current working phone number and two other emergency phone numbers. **We must be able to reach a parent/guardian or emergency contact at all times for your child's safety!**

Transportation

Parents/guardians are responsible for transportation and may instruct his/her child to walk to/from the program. **Children must be picked up promptly at 3pm.** If tardiness in child pick up is a repeat issue, Project Transformation reserves the right to dismiss your child from the program.

Medication

We are not able to give a child medication and children should not bring medication to the site. Children with asthma are allowed to bring their inhalers, but must provide a note from the parent/guardian. Parent/guardian will be called if a child becomes ill.

Attendance & Reading Program

Every day of the program is important! Last year, 91% of our children improved/maintained their reading levels during our program, but this happens by attending most or all program days. We expect children to attend the **entire day from 9am-3pm, all weeks of camp!** If your child misses the program for 3 consecutive days without prior communication with the Site Coordinator, Project Transformation reserves the right to give your child's spot to someone on the waitlist. Project Transformation will excuse up to 1 week (4 days) due to vacation.



Summer 2019 Registration

Discipline Policies and Consequences

Children are expected to act with respect towards others and church property. Disrespect, inappropriate language, fighting, bullying, or damaging property will not be tolerated. In order to maintain a safe and positive environment, any child unwilling to follow Project Transformation's discipline policies may be suspended or dismissed from the program.

What are Family Fun Nights?

These are two nights during the summer when the whole family is invited for a night of food and activities. These begin at 6pm with dinner and include activities planned by our college interns. **This summer these will take place on Thursday, June 26th and Thursday, July 25th. Please put these on your calendar now!**

What will my child be doing during the program hours?

The program begins at 9am with breakfast. Activities include one-on-one reading and reading/writing activities, art, games, recess, character development or Bible lessons, and more! Breakfast, lunch and a snack are provided during the day.

What to bring to camp?

Just bring yourself! A healthy breakfast, lunch, and snack are provided. Please do NOT send any outside food/drink with your child. Children SHOULD come to camp wearing clothes and shoes they are comfortable playing games and going outside in (dresses and flip flops can limit the fun!). Toys, backpacks, and electronics should be LEFT AT HOME! Any of these items brought to program will be kept by the site coordinator until the end of the day.

What is the purpose of the Summer Program?

To provide holistic programming in our 4 pillar areas:

- 1) Developing Literacy
- 2) Cultivating Leadership
- 3) Celebrating Diversity
- 4) Serving Community.

Who is Project Transformation Indiana?

We are a faith-based, nonprofit organization that **provides summer programs with a focus on literacy and social-emotional development for children**, equips college-age young adults to lead, and helps connect churches with their communities.

Summer Program: Monday through Thursday; 9am to 3pm

There is NO program on Fridays!

First Day: Monday, June 10th

NO Program on July 4th

Last Day: Tuesday, July 30th