

**Girls Inc. of Lakeland & Bartow
Summer Program Application
June 1, 2020-July 24, 2020**

FOR OFFICE USE ONLY

Date Received: _____
Received by: _____
Reg. Paid _____ Date Paid _____
Starting date: _____
Scholarship requested: _____
FT: _____ PT: _____
Check in number: _____
Eligible for Free Lunch ___yes___no___
Referred by: _____ MTS _____

Child's Name _____

Home Phone _____

Cell Phone _____

Location: ___Lakeland Site-The Jenkins Building___ ___Bartow Site – The Imogen Currie Parmalee Branch___

Address _____
(street) (city) (state) (zip)

E-mail Address _____

Grade entering fall of 2020 (**Latest Copy of Report Card Must Be Attached**) _____ Age _____

Birthdate _____ Ethnic Background: ___White___Black___Latino___Multi-Cultural___Other_____

Do child live with? ___Mother___Father___Grandparents___Other_____

How many Sisters _____ Brothers _____? Total number in family _____ T-Shirt Size _____

Does your sister attend Girls Inc.? ___Yes___No___ If yes, sister's name _____

Does child receive free or reduced lunch at school? ___Yes___No___

Income Level: ___Under \$10,000___\$10,000 - \$15,000___\$15,000 - \$20,000___\$20,000 - \$25,000___\$25,000 - \$30,000___
\$30,000 - \$50,000___\$50,000-\$75,000___More than \$75,000

Emergency Information/Please Print:

Home Phone: _____ Is someone home during the day? ___Yes___No___

Phone Number: _____ First person to speak to other than Parent/Guardian: _____

Phone Number: _____ Second person to speak to other than Parent/Guardian: _____

Mother's or Guardian's Name: _____ Work Number: _____

Mother's or Guardian's Place of Employment: _____

Father's or Guardian's Name: _____ Work Number: _____

Father's or Guardian's Place of Employment: _____

Does family have health and/or accident insurance? ___Yes___No___

Is child allowed to walk home? ___Yes___No___

Does she belong to: ___Girl Scouts___Campfire___YMCA___Other_____

Reason for joining Girls Inc: ___For Fun___For Learning___Needed place while parents work___Other_____

Has she participated in Girls Inc. Program before? ___Yes___No___

PARENTAL OR GUARDIAN'S PERMISSION (required if under 18 years of age)

My child has my permission to join Girls Incorporated. I also grant permission for the use of photos with my daughter to be used by Girls Inc. and/or its agents for public relations purposes on behalf of Girls Inc.

Parent or Guardian Signature

Date