



## **Science Club for Girls Participant Application**

Thank you for your interest in Science Club for Girls! This application is for our club participants Kindergarten/K2 through 5th grade and Middle School.

8th graders who would like to apply for our Teen programs, including our Junior Mentor program, should fill out a Teen application on our website:

http://www.scienceclubforgirls.org/teen-programs-overview

We are not able to accept applications for Junior Kindergarten or K1 students.

Clubs start the week of September 28th, with the exception of Northeastern University which starts on September 26th. Your Program Manager will contact you with more information after your daughter's club acceptance.

- Applications decision will be made starting <u>Wednesday, September 16, 2015</u> and will be considered on a space-available basis. Applications received after this date will be considered on a rolling basis for open program spaces.
- Submission of this application DOES NOT guarantee admission.
- All girls in grades Kindergarten through 8th grade are welcome to apply for Fall 2015 clubs. If the number of applicants exceeds the number of spaces available, priority placement will be given to girls of color or demonstrating economic need, as per the mission of Science Club for Girls.

For questions, please contact the appropriate Program Manager:

#### **Boston**

boston@scienceclubforgirls.org 617-391-0361 x4

#### **Brookline**

brookline@scienceclubforgirls.org 617-391-0361 x4

#### Cambridge

cambridge@scienceclubforgirls.org 617-391-0361 x5

#### Newton

newton@scienceclubforgirls.org 617-391-0361 x5

#### **General Science Club**

Lydia Peabody, Youth Program Director youthprograms@scienceclubforgirls.org

#### Science Club for Girls Fall 2015 K-8th Grade Locations:

#### **Boston:**

Edison School, 60 Glenmont Rd Mondays, 2:30 – 3:45PM *Grades K-5* 

Northeastern University, 360 Huntington Saturdays, 10:30 – 11:45AM (*Grades K-5*) Saturdays, 10:30 – 12:00PM (*Grades 6-8*) Unitarian Universalist Urban Ministries (UUUM), 10 Putnam Street Saturdays, 2:30 - 3:45PM \*\* Grades 3-5 only

#### **Brookline:**

William H. Lincoln School, 19 Kennard Street Tuesdays, 3:45 - 5:10PM \*\* Grade 5 only

#### Cambridge:

Area IV Youth Center, 243 Harvard Street Wednesdays, 3:45 – 5:15PM *Grades 6–8* 

The Amigos School, 15 Upton Street Fridays, 3:00 – 4:15PM Grades K-5 The King Open School, 850 Cambridge Street Tuesdays, 3:00 - 4:15PM *Grades K-5* 

Margaret Fuller Neighborhood House, 71 Cherry Street Saturdays, 10:30 – 11:45AM *Grades K-5* 

#### Newton:

Pine Manor College, 400 Heath Street Saturdays, 3:00 – 4:15PM (*Grades K-5*) Saturdays, 2:45 – 4:15PM (*Grades 6-8*)

Return completed applications via email to the relevant program manager, or to the office at your first choice school or program location.

# **SCIENCE CLUB FOR GIRLS**





### **CHILD'S INFORMATION**

Child's FIRST Name:	LA	ST Name:	
Optional Child's Nickname:			
Date of Birth/			
Child's Address:			
City:	State: Z	ip code:	
Grade: School:			
School City: Scl	hool State:	-	
Teacher's Last Name:	Room Nu	ımber:	
<b>MEDICAL INFORMATION:</b> Please inc should know about. For example, foods, late <b>medical issues, please enter</b> <i>None</i> .			we
<b>ELIGIBILITY:</b> Your daughter is welcome to Girls. Participants are expected to behave in dismiss any girl whose actions are disruptive we should know that will aid us in working wirdirls? If there is no important information	n a safe and respectful to the learning enviro th your daughter to en	I manner. SCFG has the discretion to inment. Is there any important information is ure her success in Science Club for	'n
<b>T-Shirt Size:</b> We sometimes have the op events. To help us prepare for such occasio			
☐ Youth S	☐ Youth XL	☐ Adult M	
☐ Youth M	☐ Youth XXL	☐ Adult L	
☐ Youth L	☐ Adult S	☐ Adult XL	

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RETURNING CLUB MEMBER: Is your child applying to return to the same Science	Club site as last year?YesNo			
SCIENCE CLUB SITE SELECTION: Pleas placing a "1," and "2," next to your selections in	se indicate your first and second site choices by n order of preference.			
Kindergarten(K2) through 5 <sup>th</sup> Grade Science Clu	ıb Options:			
<ul> <li>Amigos, Friday 3:00-4:15 PM</li> <li>Edison School, Monday 2:30-3:45PM</li> <li>King Open, Tuesday 3:00-4:15 PM</li> <li>Margaret Fuller House, Saturday 10:30-11:45AM</li> <li>Northeastern University, Saturday 10:30-11:45 AM</li> </ul>	Pine Manor College, Saturday 3:00-4:15PM Unitarian Universalist Urban Ministries (UUUM), Saturday 2:30-3:45PM (Grade 3-5 only) William H. Lincoln School, Yuesday 3:45-5:10PM (Grade 5 only) Pine Manor College, Saturday 3:00-4:15PM			
6th through 8 <sup>th</sup> Grade STEMinistas Options:				
Area IV Youth Center, Wednesday 4:15-5:45  Northeastern University, Saturday 10:30- 12:  Pine Manor College, Saturday 2:45-4:15PM				
Is your daughter a registered participant at any of the programs? Check all that apply.	ne following Science Club for Girls partner			
Area IV Youth Center	Steps to Success			
Margaret Fuller Neighborhood House	Unitarian Universality Urban Ministries			
Does your daughter have a sibling also applying for program? Sibling Name(s)	or currently participating in a Science Club for Girls			
Are there any additional family circumstances that v number of spaces available?	we should consider if the number of applicants exceeds the			
PICK UP PROCEDURE  Any Parent/Guardian listed will have permission to	pick up your child from Science Clubs.			
Please check how your daughter will get home or w	here she will go after Science Club for Girls:			
□ Parent/Guardian Pick Up				
□ Other Adult Pick Up				
□ Re-Join After/Community School Name of Program:				
□ Walk home (Grade 4 and up only)				
□ Late Bus (service provided by school where avail	adie, NOT SCFG)			
Form continue	es on next page			

### **PARENT / GUARDIAN 1**

The parent/guardian listed here will be the primary recipient of Science Club for Girls emails, including club enrollment, updates, and special events.

Relationship to Child: □Parent □L	.egal Guardian □Foster (	Guardian
First Name:	Last Name:	
Address:		<del></del>
City:	State:	Zip code:
Preferred way to reach you during o	<b>club times:</b> □Mobile Pho	ne □Home Phone □Work Phone
Mobile #:	Home #:	Work #:
E-mail:		
PARENT / GUARDIAN 2		
Relationship to Child: □Parent □L	.egal Guardian □Foster (	Guardian
First Name:	Last Name:	
Address:		
City:	State:	Zip code:
Preferred way to reach you during o	<b>club times:</b> □Mobile Pho	ne □Home Phone □Work Phone
Mobile #:	Home #:	Work #:
E-mail:		
EMERGENCY CONTACT INFO In case of an emergency and a parent may reach during Science Club hours Name (First and Last): Phone Number: Relationship to Emergency Contact	t cannot be reached, pleas	
PICK UP PERMISSION  Please indicate any additional adults, your child from Science Clubs.	other than those already l	isted, who have your permission to pick up
	• •	is form to pick up your daughter. They will
Name (First and Last):		
Phone Number:		
Name (First and Last):		
Phone Number:		

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## **SCIENCE CLUB FOR GIRLS**

### **Participant Demographics**



Science Club for Girls constantly evaluates the quality of its programming and impact on students. Access to information requested on this page will allow us to better measure our work and be accountable to our funders. Please help us by filling out the information below.

All information is optional. All individual information is confidential, as we only report information in aggregate, without identifying information. If you have any questions, please contact Lydia Peabody, Youth Program Director, at Ipeabody@scienceclubforgirls.org.

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What is the primary language spoken in your daughter's home? Please check:
□ Chinese
□ Creole
□ English
□ French
□ Japanese
□ Spanish
□ Other
Please list any additional language spoken in your child's home:
Parent/Guardian 1 Highest Education Level
☐ No formal schooling
☐ Some elementary or middle school
☐ Some high school
☐ High school degree or GED
□ Some college
☐ Trade school/Community College degree
☐ Bachelor's Degree
☐ Master's/Doctorate degree
Parent/Guardian 2 Highest Education Level
☐ No formal schooling
☐ Some elementary or middle school
☐ Some high school
☐ High school degree or GED
□ Some college
☐ Trade school/Community College degree
☐ Bachelor's Degree
☐ Master's/Doctorate degree

# **SCIENCE CLUB FOR GIRLS**

## Permission to Participate and Image Release



Child's Full Name:
Printed Name of Parent or Guardian:
Permission to Participate
I give permission for my child to participate in Science Club for Girls (SCFG) during the Fall 2015 semester. I understand that my child will be under the supervision of the SCFG staff and/or volunteer mentors who are trained, supervised and CORI background checked by SCFG. In consideration of my child being allowed to participate in these programs, I hereby agree on behalf of myself and my child, to release the SCFG Organization, their employees, agents and volunteers from any and all claims including negligence, which may be asserted by me or my child, or on behalf of my child, arising from or relating to my child's participation in the Science Club for Girls.
I understand regular attendance and good behavior at clubs are essential parts of Science Club for Girls, and I have reminded my daughter of the importance of both. I also understand that programs are continually evaluated for quality and effectiveness, and that my child will be part of these activities, but that data gathered will be shared only in aggregate with no individual identifying information associated.
I understand that submission of this application does not guarantee acceptance into a Science Club for Girls program.
Parent Signature Date
Image Release
I hereby grant to Science Club for Girls, its successors, and assignees the rights to record and photograph the image and/or voice of my child on videotape and/or photograph, to edit such video or photo at its discretion, to incorporate the same materials as such as Science Club for Girls web page, video projects, and/or promotional or program materials in perpetuity. I authorize the use of such picture, film and videotape or any portion thereof for the purposes of promoting or training for Science Club for Girls. I understand that my child's full name will not be revealed. For a period of 90 days from the date of execution of this agreement, I may revoke the rights granted to Science Club for Girls herein. If revocation is not made within this time frame, all rights granted hereunder shall remain in full force and effect.
I hereby release you and anyone using said videotape, photos, or other material from any and all claims, damages, liabilities, costs, and expenses for which I now have or may hereafter have by reason of any use thereof.
I understand that the provisions of this release are legally binding.
Parent Signature Date