



# Stafford Junction Summer Programs

***Sign Up Today! Space is Limited.***

## Additional Information:

**Free** Summer Camp

Transportation is Provided.

**Food** is Provided

**Fun** Activities and Summer Memories



## Activities include:

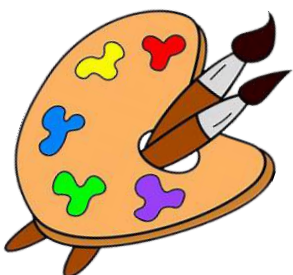
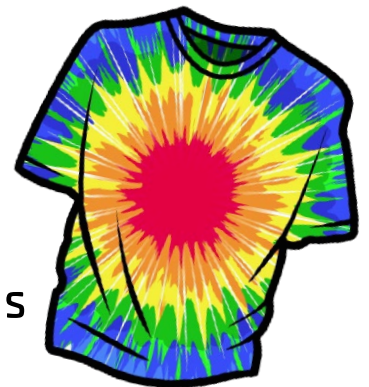
YMCA Waterpark Visit

Arts & Crafts and Outdoor Activities

Tie Dying

Math and Reading

Earn Behavior Bucks To earn Prizes!







<b>For Office Use Only:</b>
Entered in database _____
Transportation/Parents Notified _____
Group Leader Notified _____
Date Received _____

## Summer Junction Registration Form 2023

Please return completed form(s) to Stafford Junction, 791 Truslow Road, Fredericksburg, VA 22406  
Questions? Call us at 540-368-0081

**\*Space is limited. Registrations will be taken on a FIRST COME, FIRST SERVED basis\***  
**All sections of the application must be completed in their entirety to be processed.**  
**You will be notified of any changes or updates.**

### Summer Junction Camps, Dates, and Times (Please Check All Camps Your Child Will Attend)

- \_\_\_ STEAM Camp at Stafford Junction, June 5-June 8, 1 pm-4 pm. 6<sup>th</sup>-12<sup>th</sup> grade only (completed as of May 2023).
- \_\_\_ Soccer Clinic at Olde Forge Soccer Field, July 21, Friday, 10 am – 1 pm, all ages.
- \*\*Summer Camp at Stafford Junction runs from June 19 – July 20, 1 pm – 4 pm, Closed July 4.\*\*  
K – 2<sup>nd</sup> Monday, Wednesday    3<sup>rd</sup> – 5<sup>th</sup> grade Tuesday, Thursday

### General Information (Please Print Clearly)

Child's First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Gender \_\_\_\_\_  
 Birthdate \_\_\_\_\_ Grade Completed as of May 2023 \_\_\_\_\_ Neighborhood \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_  
 Medical issues or allergies \_\_\_\_\_  
 Foods to avoid due to religious beliefs \_\_\_\_\_

Parent 1 \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_  
 Email \_\_\_\_\_ Work Phone \_\_\_\_\_

Parent 2 \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Street Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_  
 Email \_\_\_\_\_ Work Phone \_\_\_\_\_

### Emergency Contact and Pick-Up Information (Please Print Clearly)

Name and phone numbers needed in case of emergency. May not live in same residence as the child.  
 Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_  
 Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Persons authorized to pick up child \_\_\_\_\_  
 Persons **NOT** authorized to pick up child \_\_\_\_\_

**Additional Required Information – This information is for Stafford Junction only and used for funding purposes.**

Parent’s Primary Language (English, Spanish, Farsi, etc.) \_\_\_\_\_

Hispanic, Latino, or Spanish Origin: No \_\_\_ Yes \_\_\_

Race: Caucasian \_\_\_ Black/African American \_\_\_ Native Indian/Alaska Native \_\_\_ Native Hawaiian/Pacific Islander \_\_\_

Asian \_\_\_ Multiracial \_\_\_ Other \_\_\_

Employment Are the Parent(s) or Adult(s)s in the Household Employed? \_\_\_ YES How many? \_\_\_\_\_ \_\_\_ NO

\_\_\_ Full Time \_\_\_ Part Time \_\_\_ Retired \_\_\_ Student \_\_\_ Unemployed

Estimated Household Income: [ ] Under 20,000 [ ] 20,000 – 40,000 [ ] 40,001-60,000 [ ] 60,001-80,000  
[ ] Over 80,000

Other Income (WIC, SNAP, SSI, SSD, etc.) \_\_\_\_\_

Does the enrolling child receive free or reduced lunch? Circle one: FREE REDUCED

**Emergency Medical Authorization and Waiver of Liability**

I hereby give my consent for my child to attend programs and activities organized by Stafford Junction. I understand there are inherent risks involved in any activity and I hereby release Stafford Junction, its employees, agents, and volunteers from all liability for any injury, loss, and/or damage to person/property that may occur while my child is in attendance. I authorize Stafford Junction to obtain immediate care and consent to the hospitalization of, the performance of necessary diagnostic tests upon, the use of surgery on, and/or the administration of drugs to my child if an emergency occurs when I cannot be located immediately. It is also understood this agreement covers only those situations which are true emergencies and only when I cannot be reached. I understand Stafford Junction will make every effort to contact me and/or the designated Emergency Contacts. I acknowledge I am ultimately responsible for all costs incurred not reimbursable by my health insurance provider.

Medical Insurance Company \_\_\_\_\_ Policy Number \_\_\_\_\_

**Transportation**

I hereby understand and give my consent to the following transportation situations, allowing for my child to be transported as outlined:

STEAM Camp (June 5 – June 8): transportation is provided for STEAM camp on a first come first served basis.

Summer Junction (June 19– July 20): transportation is provided by Stafford County Public School bus.

Soccer Clinic (July 21): transportation is not provided for soccer clinic. All transportation is the responsibility of the parent(s).

*\*After the application is accepted, specific pick-up and drop-off locations and times will be shared.\**

**Child’s T-shirt size (circle one):**

Child Size:	X-Small	Small	Medium	Large	X-Large
OR					
Adult Size:	Small	Medium	Large	X-Large	2X

## Code of Conduct

Stafford Junction practices four core values: Caring, Honesty, Respect, and Responsibility. We are not a day care service. The program is staffed by volunteers whose sole responsibility is to provide stimulating activities to youth, preventing summer learning loss. Misbehavior by students will not be tolerated.

The standard disciplinary process is as follows: verbal warning, second verbal warning and parents contacted, two-day suspension from the program and parents contacted, dismissal from the program.

Exceptions: If a student commits a serious infraction, the Youth Program Manager has the option to immediately dismiss the child from the program.

## Photograph and Video Waiver

I acknowledge that Stafford Junction may utilize photographs or videos of participants that may be taken during involvement in Stafford Junction activities. This includes internal and external use including but not limited to Stafford Junction's website, Facebook, and publications. I consent to such uses and hereby waive all rights of compensation. If I do not wish the image of my child to be included in the above mentioned, it is my responsibility to inform them to exclude themselves from photographs or videos taken during such activities.

Parent/Guardian Print Name: \_\_\_\_\_

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

Date: \_\_\_\_\_