

Shero Camp 2026
Enrollment Request Form
Campers Ages 5-7

Note: This form is a REQUEST ONLY. Registration is NOT confirmed until all steps are followed and a non-refundable deposit is paid. Please see details under "Reserve Your Spot".

Camp Dates & Costs:

\$100 per week per camper

Monday-Friday
8:00am-5:30pm

Please choose the weeks that your child plans to attend:

- ☐ Week 1: June 8th-June 12th
- ☐ Week 2: June 15th-18th (No Camp on Friday, June 19th)
- ☐ Week 3: June 22nd-26th
- ☐ Week 4: July 6th-10th
- ☐ Week 5: July 13th-17th
- ☐ Week 6: July 20th-24th

Camper Information:

Full Name: _____ Date of Birth: ____/____/____ Age: _____

School Name: _____ Grade: _____

Address: _____ City: _____

State: _____ Zipcode: _____

Parent/Guardian Information:

Name: _____

Relationship to Camper: _____

Parent/Guardian Email Address: _____

Parent/Guardian Phone Number: _____

Emergency Contact Information (someone besides parent/guardian listed above):

#1 Emergency Contact Name: _____

Relationship to Camper: _____ Phone Number: _____

#2 Emergency Contact Name: _____

Relationship to Camper: _____ Phone Number: _____

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Medical Information:

Does your child have any medical conditions/allergies? (Please specify):

Is there anything that upsets your child? If so, how can we best help them?

Is there anything else we should know about your child? We want to create the best experience we can for them.

Does your child have insurance? (Check one):

- ☐ Yes
- ☐ No
- Insurance Provider (if yes): _____
- Policy Number: _____

Medical Waiver Consent:

I hereby give my consent for my child to participate in the Girls Inc of Monroe County Shero Camp 2026. I give permission for my child to receive medical attention in case of injury or emergency, if necessary.

I certify that the information provided above is correct and that I am the legal guardian of the participant. I agree to adhere to all program rules and policies.

Signature of Parent/Guardian: _____ Date: _____

Photo & Media Consent:

Yes, I give Girls Inc permission to take pictures of my child and share them on all Girls Inc media materials, including but not limited to Facebook, Instagram, and promotional flyers.

_____ (Please Initial)

No, I do not give Girls Inc permission to take pictures of my child and share them on all Girls Inc media materials, including but not limited to Facebook, Instagram, and promotional flyers. _____ (Please Initial)

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Reserve Your Spot

Your camper's spot is **NOT** confirmed until the following steps have been completed:

1. Complete Enrollment Request Form and submit to Girls Inc of Monroe County. Email it to us at summercamp@girlsinc-monroe.org or submit in person.
2. You will receive an email from Girls Inc confirming availability for weeks selected within 24 hours of submitting enrollment request form.
3. Pay the non-refundable camp deposit! Please pay your deposit within 24 hours of receiving email confirming availability from Girls Inc. See details about deposit below.
4. Receive confirmation email from Girls Inc!

Registration Fees: *Registration Fee:* \$50 Non-Refundable deposit for each week your child plans to attend. (For example if your child plans to attend all 6 weeks your deposit is a total of \$300. Your deposit will go towards your total amount due for camp.) ***Please DO NOT pay a deposit until the enrollment request is confirmed.***

Payment Options:

- Card on the Girls Inc Website
- Check (please make payable to Girls Inc)
- Cash

Camp T-Shirt Information:

Shirt Size (**Youth sizing**):

- ☐ X-Small
☐ Small
☐ Medium

- ☐ Large
☐ X-Large

Shirt Size (**Adult Sizing**):

- ☐ X- Small
☐ Small
☐ Medium

- ☐ Large
☐ X-Large

*Don't see your child's size? Please list their size here:_____