

Savvy Sisters Jump (Double Dutch)

A Division of *Sister to Sister: One in the Spirit, Inc.*

Application

Savvy Sisters Jump (Double Dutch) is a division of Sister to Sister: One in the Spirit, Inc., a 501(c)(3) not-for-profit Organization. We are dedicated to mentoring, building self-esteem, and empowering girls and women of color of all ages in the Harlem Community of New York City. However, we accept members from all backgrounds and cultures. We encourage girls from ages 8-17 to join our program.

**Please complete and return the application below to: Savvy Sisters Jump,
Sister to Sister: One in the Spirit, Inc., P.O. Box 260, New York, NY 10030.**

I. Applicant Information

Name _____ Date of Birth _____

Address _____

(City) (State) (Zip Code)

Telephone Number (____) _____

Parent/Guardian's Name _____

Address (if different from above) _____

(City) (State) (Zip Code)

Email _____ Cell Phone: (____) _____

II. Medical History of Applicant:

Name of Primary Care Physician: _____ Phone: (____) _____

Insurance Provider: _____ Insured: _____

Emergency Contact: _____ Phone: (____) _____

Does applicant have any physical problems or limitations, or allergies? Please describe below:

Is applicant receiving treatment for any medical or social issues? Please describe below:

Is there any additional information you wish us to know about your child and her participation in our program? Please provide details below:

III. Release and Consent Form - Please read this carefully before signing.

"Savvy Sisters Jump (Double Dutch)" (*Savvy Sisters Jump*) and Sister to Sister:One in the Spirit, Inc. (*Sister to Sister*) appreciates you and your child's interest in becoming a member. This application is intended as a means of informing and gaining the consent of the parent/guardian to allow their child to participate in the *Savvy Sisters Jump* program.

After receiving this completed application from you, we will evaluate the information and send you a letter letting you know if your child has been accepted into the *Savvy Sisters Jump* program. Much of the information you supply in this application packet, will be used to evaluate and assess your child's ability to participate in our *Savvy Sisters Jump* program. Therefore, the *Savvy Sisters Jump* staff, or the *Sister to Sister* staff may, at times, need to access and share this information with others when it is in the best interest of determining your child's fitness to participate in the *Savvy Sisters Jump* program. However, where possible, we will preserve the child's/parent's/guardian's privacy and notify the child/parent/guardian before such information is shared outside of our Organization and obtain permission.

Please initial each of the following:

_____ I understand that neither *Sister to Sister:One in the Spirit, Inc.*, *Savvy Sisters Jump (Double Dutch)*, nor any of its affiliates are obligated to provide a reason for their decision in accepting or rejecting me (my child) as a member.

_____ I give my informed consent and permission for my child to participate, if accepted, in the *Savvy Sisters Jump* program and its related activities.

_____ I agree to have my child follow all *Savvy Sisters Jump* program guidelines and understand that any violation on my child's part may result in suspension and/or termination from participation in the program.

_____ I hereby acknowledge and consent to my child being transported by *Savvy Sisters Jump* program staff, or the *Sister to Sister* staff or representatives while participating in the *Savvy Sisters Jump* program and that such transportation is voluntary at her own risk.

_____ I release *Sister to Sister:One in the Spirit, Inc.*, *Savvy Sisters Jump (Double Dutch)*, and any of its affiliates, of all liability of injury, death, or other damages to me, my child, family or assigns that may result from her participation in the *Savvy Sisters Jump* program, including but not limited to transportation, and hold harmless any *Savvy Sisters Jump* program staff, or *Sister to Sister* program staff, or other affiliates and representatives, both collectively and individually, of any injury, physical or emotional, other than where gross negligence has been determined.

_____ (Optional) I agree to allow *Savvy Sisters Jump (Double Dutch)*, or *Sister to Sister:One in the Spirit, Inc.*, or its affiliates, to use any photographic image of my child taken while participating in the mentoring program. These images may be used without compensation in *Savvy Sisters Jump (Double Dutch)*, or *Sister to Sister:One in the Spirit, Inc.* promotions or other related marketing/out-reach documents.

By signing below, I attest to the truthfulness of all information listed on this application and agree to all the above terms and conditions.

Parent/Guardian Signature: _____ Date: _____