



Beacon Street Girls Book Club

BEGINNING MONDAYS SEPTEMBER 30TH — NOVEMBER 11TH

Mondays 6:30pm—8:30pm (6 weeks)

Girls 9 —12 years old

A place where your opinion counts, you can ask questions, and be yourself!



Charlotte



Avery



Maere



Isabel



Katani

Welcome back to Beacon Street! All girls new and returning are invited to join us as we inspire girls to believe in themselves and provide them with positive role models, and empowering, healthy messages. Girls deserve their own space in the world—a place that speaks to them about issues they care about in their own language.

Come join us and be part of the Beacon Street Girls Book Club where we explore themes affecting girls, do crafts, read books, share snacks, make skits, play games, have fun, and be ourselves!

Girls Incorporated of Durham
Inspiring all girls to be strong, smart, and bold

JOIN NOW!!

\$20 for Members
\$35 for Non-Members

For more information about the Beacon Street Girls Book Club, please contact:

Emma Conner

Tel: 905-428-8111 ext. 23

Fax: 905-428-9992

Email: econner@durham.girls-inc.org

www.girlsinc-durham.org

1-398 Bayly Street West
Ajax, ON L1S 1P1

PROGRAM REGISTRATION FORM

Participant Information

Child's Last Name: _____ Child's First Name: _____
Birth Date: M _____ D _____ Y _____ Age: _____ School/ Grade: _____
Health Card #: _____

Please indicate any medical information that you would like us to be aware of. i.e. food allergies, medications, etc. _____

Main Contact

Last Name: _____ First Name: _____
Relationship to Child: _____
Address: _____
City: _____ Postal Code: _____ Home Phone: _____
Work Phone: _____ Cell Phone: _____
Email: _____
Alternate/Emergency Contact Name: _____
Phone Number: _____ Alternate Phone Number: _____

I have provided Girls Incorporated of Durham with all necessary medical information and can be reached at the numbers listed. I acknowledge and accept the risk for any accidents or injuries arising by reason of participation in the program by myself or the person who is shown as the "participant".
Parent/Guardian Signature: _____ Date: _____

Media Release

There may be occasions where pictures of your daughter will be taken. These photos will be used for newsletter, videos, brochures, annual reports, radio, television newspapers and our home website.

- I give my permission for my daughter to appear in any Girls Incorporated of Durham publications.
- I do not give permission for my daughter and or myself to appear in any Girls Incorporated of Durham publications.

Parent/Guardian Signature: _____ Date: _____

Names of Programs

- GIRLSPACE
 - GIRLZONE
 - P.A. Day Camp
 - March Break Camp
 - BSG Book Club
 - Investing Matters
 - GIRLSTART
- Cost: _____
Location: _____
Date: _____
Member: _____ Non-Member: _____
Paid: Cash Cheque Credit Card
Type: _____
CreditCard# _____

Exp: _____

Name on Card: _____

How did you hear about this program?

OFFICE USE ONLY
No Charge (Member)
Receipt #: _____