2019 Summer SEARCH: The Summer Exploration Academy
Chestnut Mountain Creative School of Inquiry

Registration is March 3rd through April 19th.
Dates: June 3rd – 7th        Hours: 8:30 – 12:00
Cost $95.00

Classes are filled on a first-come, first-serve basis and fill up fast, so send in your registration early!
Leigh Brown, Summer SEARCH, Hall County Schools, 711 Green Street, Gainesville, GA 30501

Parent Verification of Student’s Eligibility for Summer SEARCH

If choosing Option 3 and you do not want to register online, please print out the registration form and give the form to your child’s homeroom teacher to get a required signature, verifying your child’s level of performance. Then send the registration form along with a check or money order $95.00 to the address above. Only paper applications will be accepted for children who qualify for Summer SEARCH via Option 3.

Summer SEARCH is for students who meet one of the criteria below in grades 1-5. Summer SEARCH is not available for Kindergarten students. Registration for all 3 options may be completed online. Only students who are qualified gifted or any students who attended last year are able to pay online. You will be directed to My Payments Plus and you should see an option to pay Summer SEARCH $95. If it does not show up on your child’s My Payment Plus, please send a check or money order for $95 to the address above. Please make payment payable to Hall County Summer SEARCH. This year, we will collect ID numbers during registration to add students to the database for online payment for next year.

_____ Option 1: Student has been tested for SEARCH (Whether student qualified or not in grades 1-5.) Registration online – payment of $95.00
_____ Option 2: Student has successfully participated in Summer SEARCH 2016, 2017, OR 2018. Registration online – payment of $95.00
_____ Option 3: Teacher verification that although child has not been nominated for SEARCH, he/she consistently demonstrates curiosity, self-directed learning, advanced levels of achievement, and maturity necessary for the program. If you print out the form for this option please get the required teacher signature and send to the address listed above along with a registration fee of $95.00 or you may register online and send the registration fee to the address listed above.

Recommended Teacher Name ________________________________________  Recommending Teacher Email ________________________________________

Payment must be made for the application to be submitted and complete.

Do you affirm that your child meets criteria for Summer SEARCH?
☐ Yes

Do you authorize release of your child’s test scores to the Summer SEARCH program?
☐ Yes

(Please type or print clearly.)

<table>
<thead>
<tr>
<th>Student’s Name</th>
<th>Student ID#</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current School</td>
<td>Grade Level</td>
</tr>
</tbody>
</table>

Guardian 1 Name    Home Phone
Mailing Address    Cell Phone
City, ZIP          Email (No Hotmail addresses, please)

Guardian 2 Name    Cell Phone

The following people have my permission to check my child out of Summer SEARCH and may be notified in case of an emergency if guardians cannot be reached.

1. Name ______________________________ Relationship __________________________ Phone Number __________________________
2. Name ______________________________ Relationship __________________________ Phone Number __________________________
3. Name ______________________________ Relationship __________________________ Phone Number __________________________

T-Shirt Order Form

Please check one:
☐ Youth Small       ☐ Adult Small
☐ Youth Medium      ☐ Adult Medium
☐ Youth Large       ☐ Adult Large
☐          ☐ Adult XL

Course Selection
I understand that my child will participate in ONE 3.5-hour class and that he/she will be assigned to his/her first choice when possible.

First Choice: __________________________
Second Choice: _________________________
Third Choice: __________________________
Fourth Choice: _________________________
**Transportation** (Please check one.)

**Bus:** Avoid long car rider lines by dropping your child off and picking him/her up from one of the sites listed below. Please check a school ONLY if you are interested in daily transportation to and from Chestnut Mountain Elementary, site of Summer SEARCH 2017:

- [ ] Chestatee Middle
- [ ] East Hall Middle
- [ ] North Hall Middle
- [ ] West Hall Middle

**Car:** [ ] My child will be a car rider.

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**Medical and Insurance Release Form**

**Student’s Name:**

List any health conditions (asthma, ADHD, diabetes, etc.) and allergies:

Additional comments to help ensure a successful week for your child:

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I understand that my child will be participating in activity classes and possibly field trips during the Summer SEARCH program. I give my consent for the above named student to accompany his/her class on field trips that are a part of the curriculum for his/her Summer SEARCH course. I understand that the Board of Education does not carry insurance for injuries my child may sustain during Summer SEARCH activities.

If there is an emergency or accident involving this student and the parent/guardian cannot be reached, I give permission to Summer SEARCH staff to take appropriate emergency action, including calling 911, for transportation to a hospital. I also give permission to the hospital’s emergency room staff to treat the student unless I am present and request otherwise. Fees for transportation and medical services will be the responsibility of the parent/guardian.

__________________________  ___________________________
Parent/Guardian Signature  Date

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**2019 Summer SEARCH Refund Policy:**

- Before April 1\(^{st}\) - full refund granted
- From April 1\(^{st}\) to May 1\(^{st}\) – 50% refund
- After May 2\(^{nd}\) - no refunds

If you request a refund in the refund time period listed above those will not be processed until the week of June 3\(^{rd}\).

__________________________  ___________________________
Parent/Guardian Signature  Date

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**2019 Field Trip Policy:**

If your child’s Summer SEARCH course goes on a field trip, there will be an additional $3.00 charge that will need to be paid prior to the field trip.

__________________________  ___________________________
Parent/Guardian Signature  Date
Internet Network Access Agreement

Student’s Name:

I accept responsibility to abide by the Hall County Board of Education Internet policy and procedures as stated in this agreement. I understand that use of the Internet and access to it are privileges, not rights, and I agree:

- To use the Internet network for appropriate educational purposes;
- To use the Internet network only with the permission of designated school staff;
- To be considerate of other users on the network and use appropriate language for school situations;
- Not to intentionally degrade or disrupt Internet network services or equipment. This includes but is not limited to tampering with computer hardware or software, vandalizing data, invoking computer viruses, attempting to gain access to restricted or unauthorized network services or violating copyright laws;
- To immediately report any security problems or breaches of these responsibilities to appropriate Summer SEARCH staff;
- Not to divulge personal information such as addresses and telephone numbers over the Internet.

I understand that I have no right to privacy when I use the school internet network, and I consent to staff monitoring of my communications.

I also understand that any conduct that is in conflict with these responsibilities is inappropriate and may result in termination of network access and possible disciplinary action.

Student Signature: [ ] Date: [ ]

Parent/Guardian Signature: [ ] Date: [ ]

Photo/Videotape Release

It is the practice of the Hall County School District (HCSD) to recognize student achievement and accomplishments. I give permission for my student to be photographed, interviewed, and/or videotaped for stories/articles promoting Summer SEARCH or the school system and to have his/her name published. These stories may appear in social media, promotional videos, newspapers, the HCSD website and/or on television. I consent for the release of the photographs/videotapes in school-related coverage.

Student Signature: [ ] Date: [ ]

Parent/Guardian Signature: [ ] Date: [ ]

YMCA After-Camp Care

We have partnered with the YMCA to offer after-camp care for Summer SEARCH students. The YMCA will pick the students up from Chestnut Mountain Elementary School and take them to the YMCA Summer Camp Program each day during the week of June 3-7. The cost will be $55 for YMCA members and $67 for non-YMCA members. During the week, the children will have the opportunity to swim, play games, and enjoy other activities. The YMCA program is open until 6:00 PM each day. You may choose pick up at the Spout Springs School of Enrichment or the JA Walters Facility. Registration for this is separate from Summer SEARCH registration. Please check yes or no if you will be participating in this option.

Yes, my child will participate in YMCA After-Camp Care and will fill out the separate registration.

No, my child will not participate in YMCA After-Camp Care.

Questions?

Contact Summer SEARCH Director Leigh Brown at leigh.brown@hallco.org

A limited number of scholarships may be available. Only students who qualify for free and reduced lunch will be considered. If you need financial assistance and would like to apply for a scholarship, email summersearch@hallco.org.

Please double check that we have accurate contact information, your child’s course section, transportation choice, test score release and eligibility information, medical release and insurance information, internet access agreement, and photo/videotape release.