

## Summer Discovery 2026 - Registration Form

**The Summer Discovery Program is funded by United Way and The Ballmer Group! Summer Discovery offers FREE academic, enrichment, and innovative activities for students.**

- Current 9th grade students (10th graders in 2026-27) may earn high school course credit.
- Current 9th graders (rising 10th graders) will attend at Dearborn High School.
- Transportation is available for students who ride the bus during the regular school year only.
  - If a student's home school is not hosting Summer Discovery due to low enrollment, transportation from the home school to the hosting school will be provided.
- Breakfast and lunch are provided.

**Summer School Dates (Field trip date(s) are to be determined.)**

Monday June 29th - School Day 1 - Friday July 31st - School Day 24

NO SCHOOL on Friday July 3rd

<b>Rising 9th Grade Summer Discovery Schedule</b>		
<b>Rising 10th graders High School</b>	<i>9:30am - 2:30pm Math, Literacy &amp; Electives for High School Credit</i>	<i>Note: Rising 10th graders include students who are in 9th grade during the 25-26 school year.</i>

## Summer Discovery 2026 Registration Form (page 1 of 2)

**Parental Consent Form- Please complete and return by April 20, 2026. After April 20, 2026, space and staffing will determine if additional registrations will be processed.**

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

Grade in 26-27: \_\_\_\_\_

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

**CONTACT** *Primary Contact Parent/Guardian should be the individual filling out this form.*

**Primary Contact Parent/Guardian** \_\_\_\_\_

Address \_\_\_\_\_ E-mail \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home/office phone \_\_\_\_\_

**Additional Contact Information** (Individual who may be contacted in the event parent/guardians listed above can't be reached.)

Name \_\_\_\_\_ Relationship: \_\_\_\_\_ Home Phone \_\_\_\_\_

\_\_\_\_\_ Cell: \_\_\_\_\_

List of other individuals allowed to pick up your child from the school. Anyone picking up your child will be asked to show a photo ID before your child will be allowed to leave with them.

\_\_\_\_\_ Relationship \_\_\_\_\_

\_\_\_\_\_ Relationship \_\_\_\_\_

**Does the student have an IEP** \_\_ Yes \_\_ No

**Does the student have a 504 plan** \_\_ Yes \_\_ No

**Did your child attend Summer Discovery during the summer of 2025?** \_\_ Yes \_\_ No

Parent or guardian, enter your email address:

***By submitting this enrollment application, I, the parent/guardian, consent to be contacted by Summer Discovery administration and/or service providers.***

**\*\*Parents:** If you are signing your child up for the tutoring periods, it is a daily commitment. For staffing purposes, signing up for this time is **not flexible**. If your student is not signed up, they should not be dropped off until breakfast begins. See schedule above to see tutoring times. **\*\*Transportation is NOT provided for the morning and afternoon "tutoring/enrichment" sessions.**

**Summer Discovery 2026 Registration Form (Page 2)**

School: \_\_\_\_\_

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

Grade in 25-26: \_\_\_\_\_

Child's Name \_\_\_\_\_ Birthdate \_\_\_\_\_

**Consent Statement:** As the parent/guardian, I certify that my child has my permission to participate in the Summer Academic and Enrichment program. I understand that photographs and videos may be taken to document activities. I give my permission for photographs and/or videos to be taken of my child during the camp for use in educational and/or promotional materials for the Summer Academic and Enrichment program. I will follow district and school procedures regarding the health screening of my child prior to sending to school. I understand that I will be notified should a health emergency arise.

If I cannot be reached by telephone, I authorize whatever medical treatment is deemed necessary by medical personnel. My child has the following known medical conditions:

\_\_\_\_\_  
My child takes the following medications:

\_\_\_\_\_  
My child is allergic to:

\_\_\_\_\_  
Other concerns/conditions of which we should be aware:

\_\_\_\_\_  
Students who register for Summer Discovery programming must commit to attending programming throughout the summer. **Summer Discovery is not a drop-in program; it's important for students to attend daily to receive the full benefits.** Will your student be able to attend at least 70% of the summer program days?

The program is 24 days long, and the Summer Discovery Grant requires students to attend 17 or more of those days (70% attendance). Will your child(ren) be attending 17 days or more?

● **Yes, I understand that my child(ren) must attend 17 days or more.**

*Along with assessments, students in rising grades 3-10 will be asked to complete a post-survey after the program so that we can evaluate any program-related successes and challenges this year in order to continue to improve Summer Discovery to best serve all students and families. **No further action is required to provide consent for your child to participate.** If you would prefer that your child not participate, please notify the main office at your school confirming you would like to opt-out of student surveys*

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_.

**DEARBORN PUBLIC SCHOOLS**

Summer Discovery Program

**MONDAY-FRIDAY, JUNE 29<sup>th</sup>– JULY 31<sup>st</sup>, 2026 (No school on July 3rd)**

**9:30-2:30**

**LOCATION: DEARBORN HIGH SCHOOL**

Current 9th graders

Student Number: \_\_\_\_\_

Counselor: \_\_\_\_\_

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

**IN PERSON CORE CLASSES:**

**611010 Language Arts 1**

**621020 Language Arts 2**

**613000 Biology S1**

**623000 Biology S2**

**612033 World History S1**

**622033 World History S2**

**614020 Algebra 1 S1**

**624020 Algebra 1 S2**

**614980 Math Intervention- Placed in this class if they did not fail math**

**611901 Literacy- Placed in this class if they did not fail Language class**

**IN PERSON ELECTIVES:**

**616200 Multimedia**

**629170 PE 10-12**

**Block 1 :** \_\_\_\_\_

**Block 2:** \_\_\_\_\_

**Block 3:** \_\_\_\_\_

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
GIS/Counselor Signature

\_\_\_\_\_