



**San Juan Unified School District
Bridges After-School Summer Program
Application for Registration 2026**



The Bridges After-School *Summer* Program will run from:
June 22nd to July 17th, Monday through Friday, 12:00 p.m. to 6:00 p.m.

All sites will be closed on Friday, July 3rd.

Eligibility: Students currently attending San Juan Unified School District are eligible to apply for the Bridges After-School *Summer* Program at one of the participating schools. Enrollment is limited and determined on a first-come, first-served basis once priority has been applied. Priority is given to students who attend the site during the regular year, students qualified under the McKinney-Vento Homeless Assistance Act, Foster Youth, English Learners, and students eligible for free or reduced-price meals. **If your student qualifies for any of the priority groups, check here:**

Confirmation: Enrollment confirmation will be provided via your preferred district communication method.

Student Name	Last:	First:		
Student Address	Street address	City	State	Zip
Date of Birth		Student ID Number		
School/Grade 2025-26	School:	Grade:		
School/Grade 2026-27	School:	Grade:		
Is your child attending Bridges or YMCA in the 2025-26 school year?	Yes	No		
Bilingual	Yes	No	Languages Spoken:	
List Any Special Needs				

Parent/Guardian: _____	Phone: _____	Relationship: _____
Email address: _____		
Parent/Guardian: _____	Phone: _____	Relationship: _____
Email address: _____		

Site to Site Transportation – available for Carriage, Mariposa and Starr King Students: For the 2026 Bridges Summer Program, transportation is available for Carriage and Mariposa students attending the Grand Oaks summer program, and Starr King students attending the Sierra Oaks summer program. Students are eligible for this limited transportation if they attend Carriage, Mariposa, or Starr King during the regular year. Transportation pick-up and drop-off times may be earlier or later than printed program times. A transportation schedule will be provided to participating families prior to the start of the summer program. If transportation will be needed for your eligible student, please indicate with your eligible site selection in the space below.

Please select the site you are applying for below.

Submit completed applications to your Bridges Site Facilitator or to one of the regional offices listed below.

Arden Arcade (916)979-8324

1500 Dom Way, Rm 20, Sacramento 95864

- Arden Middle School
- Dyer-Kelly
- Greer
- Howe
- Whitney
- Sierra Oaks
- I will use site to site transportation between Starr King & Sierra Oaks*

Carmichael (916)971-7386

4640 Orange Grove Ave, Rm G3 Sacramento 95841

- Barrett Middle School
- Cameron Ranch
- Charles Peck
- Pasadena
- Will Rogers Middle School

Citrus Heights (916)979-8399

7901 Rosswood Dr, Rm H7 Citrus Heights 95621

- Arlington Heights
- Kingswood
- Lichen
- Ottomon
- Skycrest
- Sylvan Middle School
- Grand Oaks
- I will use site to site transportation between Grand Oaks & (circle one) Carriage Mariposa*



San Juan Unified School District
Bridges After-School Summer Program
Emergency Information 2026



Child's Full Name _____ Birth date _____

Home Phone _____ Cell Phone _____ Other Phone _____

Address _____

Parent/Guardian _____ Relationship _____

Employer _____ Business Phone _____

Parent/Guardian: _____ Relationship _____

Employer _____ Business Phone _____

Parents/Guardians child lives with 1. _____ 2. _____

Emergency Information: If my child is ill or has an emergency and I cannot be reached, please call and release my child to:		
Name (two contacts required)	Telephone	Relationship
_____	_____	_____
_____	_____	_____

Physician's Name: _____ Phone: _____

Medical Coverage: _____ ID#: _____

Parent Must Check One

1. In the event of an emergency, when a parent or guardian is unavailable, I authorize school personnel to make arrangements for my child to received medical/hospital care, including necessary transportation, in accordance with their best judgment. I authorized the physician named above to undertake such care and treatment as is considered necessary. In the event said physician is unavailable, I authorize such care and treatment to be performed by a licensed physician or surgeon. I agree to pay all costs incurred as a result of the foregoing.
2. I do not choose the above statement and desire the following action in the event of an emergency: _____

VISION: wears glasses wears contacts to be worn at all times requires preferential seating
Date of last eye exam _____ Under care of Dr. _____ Phone _____

HEARING: has a hearing problem has tubes in ears uses hearing aid requires preferential seating

GENERAL HEALTH: 1. Has the following condition(s): asthma epilepsy fainting spells diabetes hyperactive (ADHD) heart condition migraines allergies _____ allergic reaction to bee stings (describe): _____
 Other: _____

2. List Medications Prescribed: _____ Current Dosage: _____
For (diagnosis) _____ Prescribed by Dr. _____ Phone _____

3. Has a physical condition which limits participation no yes (explain): _____

"I authorize the release of my child's medical information 1. by the school district and the provider of services to the billing agent and 2. by the school district to my insurance carrier as necessary to process a claim or to request payment of Medical Assistance Benefits. Shared information will be limited to health service documentation only."

Parent/Guardian Signature _____ Date _____

Print Name _____ Relationship _____



San Juan Unified School District
Bridges After-School *Summer* Program
Parent Partnership Agreement 2026



POLICIES AND GUIDELINES

- PARTICIPATION:** Bridges After-School is open to all students who would like to participate and is offered on a first come, first served basis. Program participation requires adherence to all policies and guidelines as described below.
- ATTENDANCE:** Regular attendance is important. Students are to attend Bridges After-School *Summer* Program on operating days for a minimum of three hours per day. If a student is absent, parents are expected to communicate, written or verbally, to the Bridges program staff. **Three cumulative unexcused absences can be considered excessive and a student’s enrollment in the program may be revoked.**
- STUDENT PICK-UP:** Students participating in Bridges After-School must be signed out by a parent/guardian or someone designated by a parent/guardian (at least 16 years of age) and permission must be received in writing. Students must be picked up promptly at the end of Bridges After-School daily. If a student has not been picked up by the end of the program, Bridges staff will try to contact the parent/guardian and/or those individuals designated as emergency contacts. **Three late pick-ups will result in dismissal from the Bridges After-School Program.**
- STUDENT BEHAVIOR:** All students must follow San Juan Unified School District’s school rules and any additional policies of the Bridges After-School program. ***Disruptive or disrespectful behavior toward other students or staff is a reason for dismissal.*** Bridges After-School staff will notify and/or involve parents/guardians in behavior interventions that occur. It is encouraged that parents/guardians discuss concerns about any behavior with the Bridges After-School Site Coordinator. ***THE BRIDGES AFTER-SCHOOL PROGRAM WILL NOT TOLERATE VIOLENCE, DRUGS, RACIAL SLURS, SEXUAL HARASSMENT, INAPPROPRIATE TOUCHING OR PERSONAL PUT-DOWNS TOWARD OTHERS. IF ANY OF THESE INCIDENTS OCCUR, DISCIPLINARY ACTION WILL BE TAKEN IMMEDIATELY AND COULD RESULT IN TERMINATION FROM THE PROGRAM.**
- PARENTAL SUPPORT & EMPOWERMENT:** Parents/guardians are important partners in the success of Bridges After-School Programs. We look forward to your parental participation.

I have read and understand all of the information above. I agree to adhere to all of the Bridges After-School Policies and Guidelines and help my student understand and follow Bridges After-School guidelines.

Funding for the Bridges After-School program requires that statistical information for participating students is collected and reported. Evaluators keep the information confidential and no information is reported on individual children. Your name, child’s name or identifying information will be kept anonymous and will not appear in any printed report from the study.

With my signature on the Bridges After-School Parent Partnership Agreement, I acknowledge receipt of this document and give my consent to the confidential collection and reporting of this statistical information.

Student Name _____ School _____ Date _____

Parent/Guardian Signature _____ Relationship _____