

# StarPoint Summer Camp 2025 Application

## ONLINE HOW-TO GUIDE

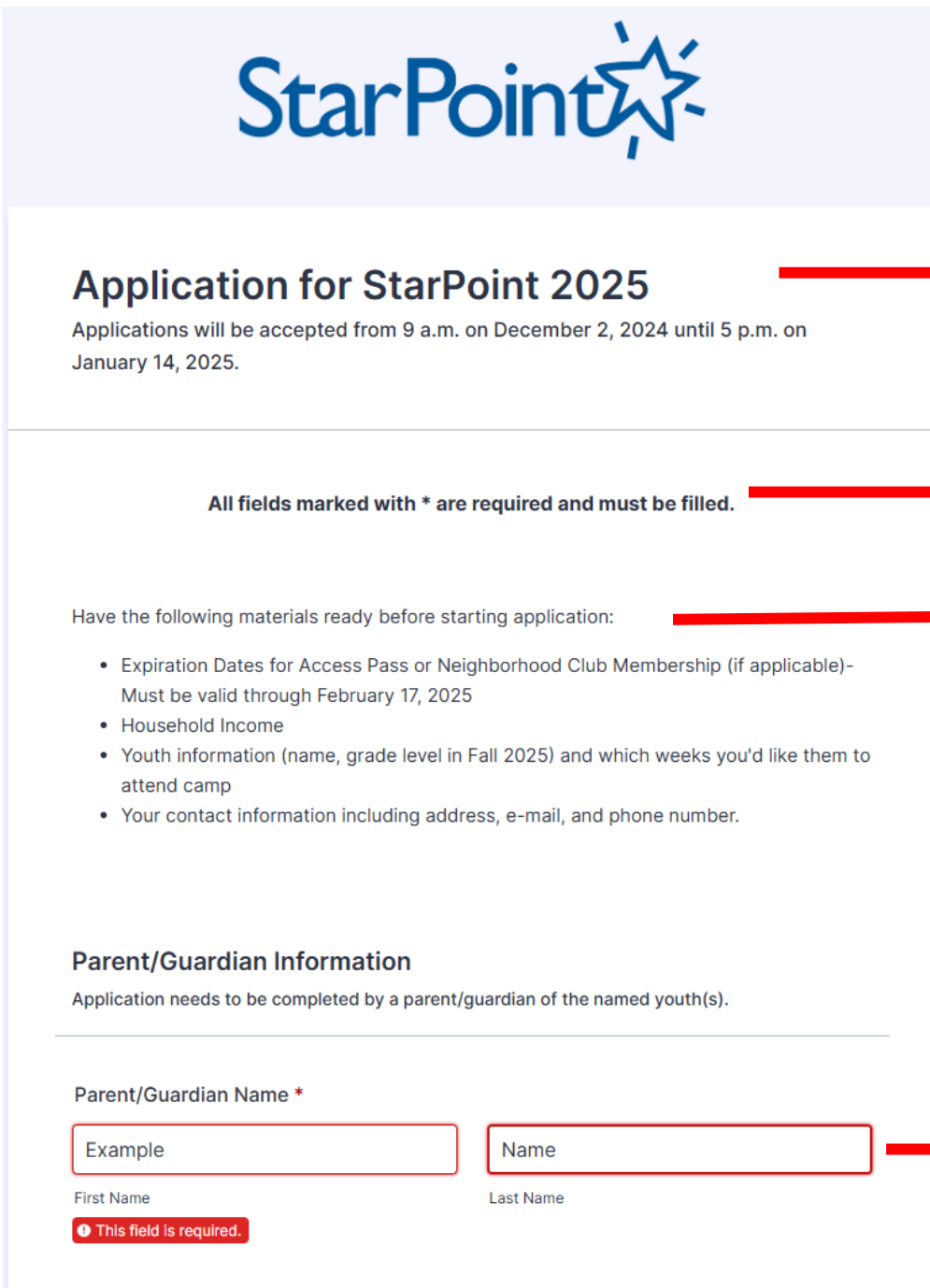
Open the application link in your internet browser by typing in the following website: <https://webforms.childrensmuseum.org/242344536486058> OR scan the QR Code with your phone if completing the application on your mobile device.

The StarPoint webpage also has the application link posted on it.

The link will open to a web page that looks like the picture below:



Scan to open the application



**StarPoint**

### Application for StarPoint 2025

Applications will be accepted from 9 a.m. on December 2, 2024 until 5 p.m. on January 14, 2025.

**All fields marked with \* are required and must be filled.**

Have the following materials ready before starting application:

- Expiration Dates for Access Pass or Neighborhood Club Membership (if applicable)- Must be valid through February 17, 2025
- Household Income
- Youth information (name, grade level in Fall 2025) and which weeks you'd like them to attend camp
- Your contact information including address, e-mail, and phone number.

#### Parent/Guardian Information

Application needs to be completed by a parent/guardian of the named youth(s).

Parent/Guardian Name \*

Example	Name
First Name	Last Name

**This field is required.**

The application closes at 5 p.m. on January 14, 2025.

If a required field is not filled out, a red box will appear, and you will be unable to submit the application.

Renew your Neighborhood Club or Access Pass Membership by coming in-person to the Box office or online:

Neighborhood Club:  
<https://www.childrensmuseum.org/join/neighborhood-club>

Access Pass:  
<https://www.childrensmuseum.org/visit/access-pass>

Type YOUR first and last name in the boxes.

Address \*

Example 100 St.

Street Address

Street Address Line 2

Indianapolis

City

IN

State / Province

46204

Postal / Zip Code

This field is required.

Type YOUR full home address in the boxes.

Phone Number \*

(111) 111-1111

Please enter a valid phone number.

This field is required.

Type YOUR phone number in the boxes. This is the number that will be used to contact you regarding admission status.

Email \*

khugo@childrensmuseum.org

example@example.com

This field is required.

Type YOUR email address in the box. This is the email that will be used to contact you regarding admission status.

Are you a current Neighborhood Club Member? (Renew membership if it expires before February 17, 2025 before submitting this application) \*

Yes

No

If you are a current Neighborhood Club Member, select 'Yes'. A second box will appear for you to put in the expiration date for your Neighborhood Club membership.

Neighborhood Club Membership Expiration Date \*

03 18 2025

Month

Day

Year

Does anyone in your household participate in the Mid-North Promise Program? \*

Yes

No

If you are a current Mid-North Promise Program Participant select 'Yes'

Is anyone in your household currently enrolled in the Access Pass Program? (Renew pass if it expires before February 17, 2025 before submitting this application) \*

Yes

No

If you are a current Access Pass Member, select 'Yes'. A second box will appear for you to put in the expiration date for your Access Pass membership.

Access Pass Expiration Date \*

Month

Day

Year

Number of People (Youth and Adults) Living in Household \*

Please Select

- Please Select
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- >9 (please specify)

Select the TOTAL number of youth and adults living in your household.

Household Income \*

Please Select

- Please Select
- \$0-\$37,813
- \$37,814-\$47,766
- \$47,767-\$57,719
- \$57,720-\$67,672
- \$67,673-\$77,625
- \$77,626-\$87,578
- \$87,579-\$97,531
- >\$97,532 (please specify)

Select the range of TOTAL household income. Verification may be required.

### Youth Information

How many youth would you like to register? \*

Please Select

- Please Select
- 1
- 2
- 3
- 4
- 5

Select the number of youths you will be registering.

Youth # 1 \*

ExampleYouth

First Name

Name

Last Name

Write the first and last name of the first youth you are registering.

Past StarPoint Experience: \*

Please Select

- Please Select
- Previous camper
- New camper but is a sibling of a previous camper
- New camper

Select if your youth has participated in StarPoint in the past or not.

Grade for the 2025-2026 School Year \*

Please Select ▼

Please Select

- 1st
- 2nd
- 3rd
- 4th
- 5th
- 6th

Select the grade your youth will be going into for the upcoming 2025-2026 school year. This camp is only for campers rising to 1st to 6th grade.

Select the camp weeks you want to register this youth for (check all that apply). \*

- Week 1: Powerful Paleontology June 16-20 (no camp on June 19)
- Week 2: 100 Years of Joy, Wonder, and Curiosity June 23-27
- Week 3: Retro is Rad! June 30-July 3 (no camp on July 4)
- Week 4: A Peruvian Summer July 7-11

Select the weeks you would like to register your camper for. You can sign them up for any combination of weeks.

Would you like to add this youth to a waitlist if selected weeks are full? \*

Yes  No

Youth(s) who do not receive a spot will be placed on the waitlist if you select 'Yes'. If any spots open, we will fill from this list.

Youth # 2

First Name

Last Name

If you selected to register more than one youth (question above), boxes will appear for each additional youth asking for their name, grade level, and weeks requested for camp

Share any relevant information below:

Share any additional information you think would be helpful for the Family Programs team to know.

**Submit**

If all the information above looks accurate, click SUBMIT!  
You did it!



Once you submit the application, you will see this pop-up message. Check your email to ensure you received a copy of your application.

Thank you for applying to StarPoint Summer Camp 2025! You will receive a confirmation email shortly with a copy of your application.

Applications will be reviewed beginning January 15, 2025. You will receive an email on January 31, 2025 notifying you of your registration status.

Reach out to Kate Hugo at [khugo@childrensmuseum.org](mailto:khugo@childrensmuseum.org) if you have any questions or need to make any changes to your application.

**If you have any questions or need assistance with applying, contact Kate Hugo at [khugo@childrensmuseum.org](mailto:khugo@childrensmuseum.org)**