

## **A RITE2BME!**

### **Call ME MISTER! and I AM A L.A.D.Y.**

**A RITE2BME! / Call Me Mister! and I AM A L.A.D.Y.** are programs designed for 24-30 youth grade levels 6-12, for the academically, economically, socially, and/or emotionally challenged. This program encourages each student to reach their highest potential and emphasizes certain characteristics throughout the program. A RITE2BEME program is the joining of the boy's group **Call Me Mister!** and the girl's group **I AM A L.A.D.Y.**

In almost every culture and environment there is a rite to passage for the children in the community. In America, we see in certain neighborhoods, in order to "hangout" or to be considered a man/woman with certain members of the society, certain rites have to be performed. These experiences are even outside of normal gang activity. Most of these rites are seen and encouraged via the media and poor choices of role models from the community.

**A RITE2BME! / Call Me M.I.S.T.E.R.! and I AM A L.A.D.Y.** are rite of passage programs that encourage youth through character building skills and identification of one's true self of being.

**A RITE2BME!** The program also is a college preparatory program that will expose each student to different colleges, universities, and armed forces institutions in order for the student to choose an appropriate program that is suitable for them and their needs.

### **Vision**

**A preteen/teen program designed to build character and social development within a teen that causes them to have life long success!**

#### **Core Values**

Sense of God  
Sense of Self  
Sense of Family  
Sense of Community  
Sense of World

## **Call Me M.I.S.T.E.R. (Moving Into Servant-hood Together and Earning Respect)**

### **Motto (all student must learn, understand, and recite)**

"I am a dedicated student who is devoted to planting seeds of dignity and respect and servant-hood in my life, family, friends, school, and community. I am inspiring them to cultivate those seeds producing a crop of extraordinary success. I will learn reading, writing and arithmetic and progress my self-esteem, imagination and determination. Because of my immeasurable promise, not only have I earned your respect, I demand it! A title is only important if ones' character and integrity dictate its use. When you address me, please verbalize my destiny, please do not call me by my first name or some street terminology or lingo ... call me in reference to my great vision and purpose... when you address me, call me MISTER!"

### **22 Principles of Manhood**

1. A man's source of strength is God
2. A man must be as strong as possible – mentally and physically
3. A man must protect his loved ones, even to his death
4. A man must provide for his family
5. A man must respect women at all times
6. A man's word is his bond
7. A man must have discipline
8. A man must have the will to win
9. A man knows that the will to win means nothing without the will to prepare
10. A man must know the difference between right and wrong
11. A man must be willing to take the consequences of his actions
12. A man must never misuse or abuse women
13. A man must have a plan
14. A man will know fear – but still must function
15. A man will always do his best
16. A man must be able to take the bitter as well as the sweet
17. A man must have priorities
18. A man knows there are many times he must stand alone
19. A man must be willing to take a calculated risk
20. A man must know his strengths and weaknesses
21. A man must use his wisdom and understanding
22. A man must know that before he can lead he must follow
23. A man knows, when in doubt, ask God.

**I AM A L.A.D.Y.**  
**(Learning to be Accomplished and be Devoted to Yahweh)**

**Motto (all students must learn, understand, and recite)**

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**15 Principles of a Successful Woman**  
**by Edie Berg**

1. They play to their strengths.
2. They have ambition.
3. They stay positive.
4. They're organized.
5. They're constantly learning.
6. They have a strong support system.
7. They know failure and success go together.
8. They remain grateful.
9. They work hard and persistently.
10. They don't sweat the small stuff..
11. They choose their battles wisely.
12. They do what they believe in..
13. They have confidence.
14. They have a vision for the future.
15. They feel successful, but never done.
16. They know they must trust God

**Quotes to remember and understand**

"Life's most persistent and urgent question is 'What are you doing for others?'" - Martin Luther King, Jr.

We live in a world which respects power above all things. Power, intelligently directed, can lead to more freedom. Unwisely directed, it can be a dreadful, destructive force.

Mary McLeod Bethune, Last Will & Testament of Dr. Mary McLeod Bethune

The will to win, the desire to succeed, the urge to reach your full potential... these are the keys that will unlock the door to personal excellence.

-Confucius

## **OUR OBJECTIVES**

- To Teach students to embrace their Faith in God or to accept God's role in their life
- To Teach students to become independent and resourceful
- To Teach students to strive for one's highest personal potential
- To Teach students to develop leadership skills and a sense of community responsibility
- To Teach students to demonstrate knowledge of our curriculum issues and the world
- To Teach students to build self-esteem, confidence, and self-respect
- To Teach students to explore beyond their comfort zone and challenge themselves
- To Teach students to embrace the ideals of brotherhood and sisterhood
- To Teach students to discover one's individual/creative voice
- To Teach students to develop the cognitive, social, emotional and physical attribute

## **How We Operate**

### **Tribe Time**

By creating a safe space where youth learn about and discuss topics related to our ten focus areas and other themes relevant to at risk-youth in Griffin-Spalding County

### **Global Awareness**

By exposing our youth to guest speakers, literature, and multimedia presentations during sessions, as well as, cultural outings, conferences, wilderness retreats and college tours in order to broaden their experiences and world-view. This will help youth sharpen their creative problem-solving skills and increase their self-awareness.

### **Mentorship**

Each youth is assigned to a tribal leader (youth leader up). The TL (tribal leader) is responsible for 4-6 youth. He/she must contact their youth and their youth's guardian on a weekly basis outside of program hours to ensure a positive and lasting relationship with the entire family.

## **Staff**

### **Village Elders (Board of Directors)**

Bishop D.V. Miller, II, Elder Bob Grant, Elder Mary Grant, Pastor Johan van der Merwe and Linda van der Merwe, Rev. Suzanne Cole Wages

### **Village Leaders (Coordinators)**

Juanessa Jackson and Bishop D.V. Miller, II

### **Tribal Leaders -Tentative**

Bridget Miller, Larenza Mullins, Tyree Jackson, Carlisha Truesdale, Emmanuel Clowers  
Annette Lucas, John Lucas, Sheila Arkwright

# A RITE2BME! / Call Me M.I.S.T.E.R.! and I AM A L.A.D.Y.

Date of Application: \_\_\_\_\_ Program Year: 20\_\_\_\_

Child's Name \_\_\_\_\_ Current Grade \_\_\_\_\_  
*Last, First, Middle Initial* *(Must be entering 3rd – 12<sup>th</sup> grade only)*

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

School: \_\_\_\_\_ Teacher's Name: \_\_\_\_\_

Guardian's Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Guardian's Email \_\_\_\_\_ Guardian's Cell: \_\_\_\_\_

Guardian's Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Guardian's Email \_\_\_\_\_ Guardian's Cell: \_\_\_\_\_

## **Emergency Contact**

*Must provide at least one (1) reliable Emergency Contact to call in the event of an emergency or early dismissal.*

1. Emergency Contact: \_\_\_\_\_ Phone Number \_\_\_\_\_

2. Emergency Contact: \_\_\_\_\_ Phone Number \_\_\_\_\_

Please indicate the person(s) designated to pick-up your child at dismissal.

**YOUR CHILD WILL NOT BE RELEASED WITH A PERSON WHOSE NAME DOES NOT APPEAR ON THIS LIST. Must Show ID on pick up**

1. \_\_\_\_\_ Relationship to child: \_\_\_\_\_

2. \_\_\_\_\_ Relationship to child: \_\_\_\_\_

3. \_\_\_\_\_ Relationship to child: \_\_\_\_\_

**Areas of improvement needed for your child: (Check all that apply)**

\_\_\_\_\_ Reading Skills \_\_\_\_\_ Math Skills \_\_\_\_\_ Writing \_\_\_\_\_ Other \_\_\_\_\_

Yes, I give my child permission to be transported by authorized personnel of the RTMP.

No, I do not give permission for my child to be transported by authorized personal of the RTMP.

Date Received:

Rec'd. by: \_\_\_\_\_

## HEALTH ASSESSMENT

Please complete the entire form. The following information will be used for emergency purposes **ONLY**.

\_\_\_\_\_  
Child's Name (Last First Middle Initial)

\_\_\_\_\_  
Child's Doctor (Last, First)

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Name of Health Facility/Clinic

\_\_\_\_\_  
Address

\_\_\_\_\_  
Clinic Phone #

**Required Immunizations** – All participants must be current on all immunizations.

**Health Information:** Please check any medical conditions, special needs, or behavioral concerns that your child may have at the time of enrollment:

\_\_\_\_\_ Asthma

\_\_\_\_\_ Juvenile Diabetes

\_\_\_\_\_ Seizures

\_\_\_\_\_ Mental Health problems

\_\_\_\_\_ Obesity

\_\_\_\_\_ Bronchitis

\_\_\_\_\_ Immune Deficiency

\_\_\_\_\_ Epilepsy

\_\_\_\_\_ Sinus Problems

\_\_\_\_\_ Headaches

\_\_\_\_\_ Ulcers

\_\_\_\_\_ Thyroid

\_\_\_\_\_ Other \_\_\_\_\_

**From the list of communicable diseases below, circle those to which your child has already been exposed:**

\_\_\_\_\_ Chicken pox \_\_\_\_\_ Diphtheria \_\_\_\_\_ German Measles \_\_\_\_\_ Measles Mumps

\_\_\_\_\_ Scarlet fever \_\_\_\_\_ Typhoid fever \_\_\_\_\_ Whooping cough

**Does your child have any food/non-food allergies? \_\_\_ Yes \_\_\_ No. If "yes" please list those items to which your child is allergic:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Does this child have any additional health problems that would impact his/her ability to participate in any program activities? \_\_\_ Yes \_\_\_ No. If "yes" please indicate condition and limitations:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Is your child currently taking prescription medication? \_\_\_ Yes \_\_\_ No. If "yes" please list medication(s):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**NOTE:** Please be aware that at no time are staffs permitted to administer prescription or over-the-counter medication (e.g. aspirin, cold or cough medicine, etc.) unless with parental written consent.

## CONSENT/RELEASE FORM

(NOTE: IT IS VERY IMPORTANT THAT THIS SECTION IS READ THOROUGHLY BEFORE SIGNING.)

I \_\_\_\_\_ give my consent for \_\_\_\_\_ to  
Guardian's Name (Please Print First & Last) Child's Name (Please Print First & Last)  
participate in the **A RITE2BME! / Call Me M.I.S.T.E.R.! and I AM A L.A.D.Y.** Program.

1. \_\_\_\_\_ I am aware that The Damascus Road Christian Church's **A RITE2BME! / Call Me M.I.S.T.E.R.! and I AM A L.A.D.Y.** Program is a Christian faith-based organization that seeks to promote empowerment and spiritual growth through the emphasis of Christian beliefs and values in its programs.
2. \_\_\_\_\_ I am aware that **A RITE2BME! / Call Me M.I.S.T.E.R.! and I AM A L.A.D.Y.!** Program and/or the School do not provide childcare and that the purpose of this program is to enrich my child's academic, social, cultural, and spiritual development.
3. \_\_\_\_\_ I am aware that my child's continued enrollment is dependent upon his/her willingness to participate in all activities, attendance 80% of program time, and a positive display of behavior with staff and other children.
4. \_\_\_\_\_ I am aware that **A RITE2BME! / Call Me M.I.S.T.E.R.! and I AM A L.A.D.Y.** Program reserves the right to decline and/or terminate my child's participation in any or all activities without my prior approval.
5. \_\_\_\_\_ I am aware that there are no trained medical personnel on staff. In the event of a medical emergency, 911 will be called. In addition, parent(s) and/or emergency contact(s) will be notified promptly.
6. \_\_\_\_\_ I am aware that I reserve the right to observe my child in all activities that occur on the premises of **A RITE2BME! / Call Me M.I.S.T.E.R.! and I AM A L.A.D.Y.** during designated program days.
7. \_\_\_\_\_ I will not hold **A RITE2BME! / Call Me M.I.S.T.E.R.! and I AM A L.A.D.Y.** legally responsible for incidents or injuries that may occur on or off our premises before, after, or during program hours and including sponsored activities (e.g. Field trips).
8. \_\_\_\_\_ I understand that completion of this application, payment of program fees, or volunteer time committed *does not* guarantee my child's continued participation in any or all program activities
9. \_\_\_\_\_ I give consent for my child to be photographed or filmed on video for the purpose of publication and/or promotion of **A RITE2BME! / Call Me M.I.S.T.E.R.! and I AM A L.A.D.Y.** And Damascus Road Christian Church

*By signing below, I understand all the above statements and give my full consent. I further understand that my decision not to sign or adhere to the above policies may affect my child's participation in this program.*

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Date Signed

## PARENT EXPECTATION AGREEMENT

*We believe that setting clear expectations for program participation ensures that your child will have success as a participant. As a result, we have established the following expectations for parents and child participants:*

### **Parents are expected to:**

- Encourage your child's daily attendance to the program
- Support staff in encouraging positive behavior in the program
- Review and assist in completing homework assignments each day
- Encourage your child to study when there is not homework given
- Attend program-sponsored Parent/Family events/activities
- Active participation in the Parent Involvement Program
- Maintain current on payment of program fees
- Submit a copy of child's report cards quarterly**

### **Child participants are expected to:**

- Maintain a 90% attendance rate
- Enthusiastically participate in all program activities
- Respect program staff and rules
- Work hard in academic areas
- Have fun!

***My signature below indicated that I understand and agree to fulfill all the above expectations of my child and myself. I further understand that my decision not to sign may affect my child's enrollment and participation in the program.***

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*Child's Name* (Please print)

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*Parent/Guardian Signature*

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*Date*



## STUDENT PICK UP FORM

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Name of Student

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Grade level

---

Name School

Address

Phone

---

Time of pick up

---

Designated Pick Up Location

Special Directions:

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Last Period Teacher's Name

Class Room

I have provided correct pick-up information above. I will work with Rite to be Me! Program to ensure the safety of the above named child.

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

## Waiver and Permission to Transport Child

I give permission for my child ( \_\_\_\_\_ ) to be transported in a motor vehicle driven by the Staff of The RItE2BEME identified to events at the specified locations on the dates throughout the 20\_\_\_\_ - \_\_\_\_ term . I understand that my child is expected to follow all applicable laws regarding riding in a motor vehicle and is expected to follow the directions provided by the driver and/or other adult volunteers. I have read, understand, and discussed with my child that:

- (1) They will be traveling in a motor vehicle driven by an adult and they are to wear their safety-belt while traveling;
- (2) They are expected to respect each other, the vehicles they ride in, and the people they travel with during the trip;
- (3) Riding in a motor vehicle may result in personal injuries or death from wrecks, collisions or acts by riders, other drivers, or objects; and (
- 4) They are to remain in their seats and not be disruptive to the driver of the vehicle.

I recognize that by participating in these activities, as with any activity involving motor vehicle transportation, my child may risk personal injury or permanent loss. I hereby attest and verify that I have been advised of the potential risks, that I have full knowledge of the risks involved in these activities, and that I assume any expenses that may be incurred in these events of an accident, illness, or other incapacity, regardless of whether I have authorized such expenses.

As a condition for the transportation received, I, for myself, my child, my executors and assigns, further agree to release and forever discharge The Rite2BEME, its Board, the churches it represent and their agents, officers, employees and volunteers from any claim that I might have myself or that I could bring on my child's behalf with regard to any damages, demands or actions whatsoever, including those based on negligence, in any manner arising out of transportation. I have read this entire waiver and permission form, fully understand it, and agree to be legally bound by its terms.

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Parent/Guardian Name (please print)

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Parent/Guardian Signature

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Date