Office Use:
Membership #:Club/Site (Circle): CF SO SY WM LO MC ST Date of Membership:



MEMBERSHIP APPLICATION

In order for us to best serve you			formation on BOTH sides.		
 Memberships are \$ Per year. And provide membership for 1 year. Memberships available to all youth ages 6 to 18. Proof of age required. Students must be 6 years of age at time of enrollment. 					
 Some sites may be full and you may be 	put on a waiting list.	,			
 Memberships MUST be renewed annually. All youth members must attend an orientation with legal parent or guardian before becoming a member. All personal information is kept strictly confidential. 					
MEMBER INFORMATION					
First Name	Middle Initial _	Last Name	-		
Address		City	Zip		
Insurance? Y N Compa	ny	Policy No			
Physician Name		Physician Phone	····		
Preferred Hospital/Clinic		Medicaid/0	Cal No		
☐ My Child has NO Medical I	Problems OR List of Me	edications Child's Med	ical Problems /		
Allergies / Child is Taking:					
DDIMA DV DA DENT(O) / OU		NI			
PRIMARY PARENT(S) / GUA	ARDIAN INFORMATIO	N			
1. First/Last		Relations	ship		
Mailing Address		City	Zip		
Home Phone	Work Phone	Cell Pho	one		
Email Address:					
I prefer the following type(s) of communication reg	garding my child's me	mbership and club		
information: ☐ SN	MS/Text Message ☐ E	Email [☐ Phone		
Employer		Job Title _	· · · · · · · · · · · · · · · · · · ·		
2. First/Last		Relations	ship		
Mailing Address		City	Zip		
Home Phone	Work Phone	Cell Pho	one		
Email Address:					
Employer Lives with member □ Yes					
Lives with member ☐ Yes	s □ No □ Emerger	ncy Contact	orized Pick up		
Total number of individuals	s living in the home:				
AUTHORIZED PERSONS TO	PICK-UP MEMBER (o	outside of parent/qua	rdians):		
1. First/Last	Relation	onship			
Cell Phone	□ Emergency Conta	act			
2. First/Last		Relations	nip		
Cell Phone					
	= =				

SCHOOL	MEMBERSHIPNewRenewal GENDERMaleFemale AGE / GRADEDate of BirthGrade Level □ IEP in place CHILD'S TEACHER RACE / ETHNICITY African American Asian Caucasian Latino / Hispanic Native American Pacific Islander Multiracial Other ANNUAL FAMILY INCOME Under \$9,000 \$9,001-19,999 \$20,000-29,999 \$30,000-39,999 \$30,000-39,999 \$50,000-59,999 \$50,000-59,999 \$50,000-69,999 \$70,000-79,999 \$80,000+ CHILD LIVES WITH Both Parents Mother Father 50% Mom/50% Dad Grandparent(s) Foster Care/Guardian Aunt/Uncle Sister/Brother Foroup Home Homeless/Shelter Other PROGRAMS USED (Check all that apply) TANF Food Stamps SSI / SSDI School Lunch CalWORKs	
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CHILD'S TEACHER RACE / ETHNICITY	CHILD'S TEACHER RACE / ETHNICITY	Grade Level
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		Latino / Hispanic
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Grandparent(s) Foster Care/Guardian Aunt/Uncle Sister/Brother Group Home Homeless/Shelter Other PROGRAMS USED (Check all that apply) TANF Food Stamps SSI / SSDI School Lunch CalWORKS	Grandparent(s) Foster Care/Guardian Aunt/Uncle Sister/Brother Group Home Homeless/Shelter Other PROGRAMS USED (Check all that apply) TANF Food Stamps SSI / SSDI School Lunch CalWORKs	Father
Foster Care/Guardian Aunt/Uncle Sister/Brother Group Home Homeless/Shelter Other PROGRAMS USED (Check all that apply) TANF Food Stamps SSI / SSDI School Lunch CalWORKS	Foster Care/Guardian Aunt/Uncle Sister/Brother Group Home Homeless/Shelter Other PROGRAMS USED (Check all that apply) TANF Food Stamps SSI / SSDI School Lunch CalWORKs	
Sister/Brother Group Home Homeless/Shelter Other PROGRAMS USED (Check all that apply) TANF Food Stamps SSI / SSDI School Lunch CalWORKS	Sister/Brother Group Home Homeless/Shelter Other PROGRAMS USED (Check all that apply) TANF Food Stamps SSI / SSDI School Lunch CalWORKs	Foster Care/Guardian
Group Home Homeless/Shelter Other PROGRAMS USED (Check all that apply) TANF Food Stamps SSI / SSDI School Lunch CalWORKS	Group Home Homeless/Shelter Other PROGRAMS USED (Check all that apply) TANF Food Stamps SSI / SSDI School Lunch CalWORKs	
Other PROGRAMS USED (Check all that apply) TANF Food Stamps SSI / SSDI School Lunch CalWORKs	Other PROGRAMS USED (Check all that apply)TANFFood StampsSSI / SSDISchool LunchCalWORKs	Group Home
PROGRAMS USED (Check all that apply) TANF Food Stamps SSI / SSDI School Lunch CalWORKs	PROGRAMS USED (Check all that apply) TANF Food Stamps SSI / SSDI School Lunch CalWORKs	
(Check all that apply) TANFFood StampsSSI / SSDISchool LunchCalWORKs	(Check all that apply) TANFFood StampsSSI / SSDISchool LunchCalWORKs	
Food Stamps SSI / SSDI School Lunch CalWORKs	Food Stamps SSI / SSDI School Lunch CalWORKs	(Check all that apply)
SSI / SSDI School Lunch CalWORKs	SSI / SSDI School Lunch CalWORKs	
CalWORKs	CalWORKs	SSI / SSDI
		School Lunch CalWORKs

PARENT/GUARDIAN AGREEMENT Please Review and sign the following pages.

3,000
OPEN DOOR POLICY I understand that the Boys & Girls Clubs has an OPEN DOOR policy. Clubs are open to all members anytime during regular hours of operation. Members may come and go during those hours. I understand that the BGC is not responsible for the time or manner in which my child may arrive or depart from club premises. □ I understand the open door policy
PARENT ORIENTATION I understand that it is my responsibility to attend a site-specific Parent Orientation prior to enrolling my child. Club hours and policies may vary from site to site depending on program funding. ☐ I understand the parent orientation policy
TECHNOLOGY USE I have been given information at the orientation on the appropriate use of computers at the Club. I give my consent for my child to use email and the internet while at the Club according to the rules outlined in the Parent Member Information Manual. ☐ Yes I give permission for my child to use technology ☐ No I do not give permission
PHOTO RELEASE I consent to allow the Club to use photographs or video of my child participating in Club activities and I waive all rights for compensation. (i.e. Marketing Materials/Social Media Sites).
☐ Yes I give my permission for media release ☐ No I don't give permission
AUTHORIZATION FOR INTERAGENCY EXCHANGE OF CONFIDENTIAL INFORMATION I give permission for the release and exchange of the following confidential information within this membership application, and also the release and exchange of confidential information (ie. STAR testing data, grades and other school-related data, and all other confidentially protected data) from the following sources in order for the Club to provide programs and coordinate services on behalf of my child: I understand that my records are protected under federal confidentiality regulation and cannot be disclosed without my written consent unless otherwise provided for in these regulations. I may withdraw this consent at any time except to the extent that action has been taken in reliance upon it. This release will be in effect as long as the child has a current membership with the Club. □ I consent to share my child' child's information □ I do not consent to share my child's information
PARENT HANDBOOK I have read and agree to abide by the policies stated in the Parent Handbook. I understand that failure to abide by the policies in the handbook may result in the removal of my child from Club programs. I understand that if either I or my child violates the rules of the Club my child may be asked to forfeit his or her membership and that no membership fees will be refunded to me.
☐ I have read the parent handbook ☐ I have not received the parent handbook.
PARENT RELEASE I give permission for my child to participate in all Boys & Girls Clubs of Stanislaus County Programs. I understand that the Club and its properties are not responsible for personal injury or loss of property. I agree to hold the Club free and blameless from any claim for injury or missing items on the Club's property or in connection with any Club activity. I hereby authorize Club personnel to administer emergency medical treatment and/or transportation for my child in the event of sudden illness or accident.
☐ I give permission for my child to attend ☐ I do not give permission
 MEMBER AGREEMENT I agree to take care of my Club and the property therein. I will abide by the rules of the Club at all times. If at any time I am asked to return my Club membership card, I understand no dues will be returned to me. I Agree □ I do not agree
Walk Home
☐ Yes, I give permission for my child to walk home at o'clock ☐ No, I do not give permission for my child to walk home from the Boys & Girls Clubs.

BOYS & GIRLS CLUBS

Parent and Member Agreement

Discipline and Conduct

If Members conduct themselves in a disorderly fashion or disregard the rules of the Club, the Club's staff or volunteers will discipline accordingly. The decision to discipline is in sole discretion of the Club and may include, but is not necessarily limited to the revocation of Membership privileges. The parent or guardian of the Member who was disciplined will be notified as soon as possible of the problem and disciplinary actions.

Referrals to outside organizations for assistance may be required, and suspension from the Club may take place, if deemed suitable to the offense.

☐ I have read and understood the discipline and conduct standards

Referrals

If your child, or children, wants or needs to help we may refer you to an outside agency for assistance. The Club takes no responsibility for any information or assistance given to a Member or their parent or guardian by any such outside agency.

☐ I have read and understand the referral policy

Mentoring Services

I fully understand that the program involves mentors, who shall be selected from the community and will be screened (including a criminal background check) and trained before beginning in the program. A mentor will be expected to spend a minimum of one hour per week with my child on-site at the Boys & Girls Club. The mentor is not allowed to take or meet my child beyond the Club facility.

I understand that during the mentoring program there may be special group events (incorporating all mentors and youth) and family events planned. I understand that the staff of the Club will provide ongoing monitoring of the mentoring activities.

☐ I have read and understand the mentoring practice

Medicine Policy

It is NOT the policy of the Boys & Girls Clubs to administer any prescription medicine to Members at any time. Medications may be stored at the Club with a prescription from the doctor and a parent/ guardian release on file, but it is the responsibility of the parent and/or Member to administer their own medication in accordance with the prescription.

☐ I have read and understand the medicine policy

Health and Emergency Procedures

It is important that parents and guardians cooperate with Club Health and Emergency Procedures. Our regulations are designed to protect the well-being of all members. Please do not bring your child to the Club if they have missed that day of school, or if they have signs of illness. If a Member becomes ill while at the Club, parents will be notified to come and pick up their child.

In case of an accident or emergency involving a Member, which requires medical attention, proper medical aid will be sought. The parent or guardian will be notified as soon as possible of any emergency and any medical attention administered to the Member. If expenses for medical services are incurred, it is the Member's parent or guardian's responsibility to pay for all medical costs. Parents or guardians must promptly notify the Club of any phone number or address change so that they can be contacted in case of an emergency

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Transportation

All parents or guardians of Members are responsible for the Member's transportation to and from the Club to the Member's home. If transportation is available additional permissions will be provided for me to authorize my child to be transported.

☐ I have read and understand the transportation policy

Field Trips

For most field trips Club buses or vans will be utilized. Parents or guardians of Members will be notified in advance if other transportation arrangements must be made in order for the Member to participate in a field trip. In order for a Member to attend a field trip, the Club must receive a signed permission slip from the Member's parent or guardian in advance. Unless the Club specified otherwise, the Member's parent or guardian is responsible for transportation from the Club to the Member's home. During transportation, Members are responsible for conducting themselves in accordance with the same rules that govern all Club activities. Although accidents relating to any Club function rarely occur, in the event of an accident, it is the Member's parent or guardian's responsibility to pay all medical costs.

☐ I have read and understand the fieldtrip policy

Role of Parent and Guardians

Parents and guardians play vital roles at the Boys & Girls Clubs. It is important that the parents or guardians be involved with the growth and development of each Member. Our purpose at the Boys & Girls Clubs is to provide assistance to the parents or guardians with their children. You are the primary role model in your child's life. By being involved with the child, you can instill moral values, gain trust and share love. If a problem arises, please direct your concerns to a staff member. To schedule an appointment to discuss and resolve the matter, call the Club site in which your child attends. Club sites and numbers are found at the end of this document.

☐ I have read and understand the role of Parent/Guardian at the BGC

Responsible Adult Partnership Hours

The Boys and Girls Clubs requests that a responsible adult (an individual 18 years or older, preferably an immediate family member) partner a minimum of fiv e hours per family, per month at the Club. The responsible adult can volunteer these hours in various areas (computer lab, homework lab, games room, etc.) at the Club. One hour will be used for the Responsible Adults Meeting. There is no set time limit on this partnership.

All volunteers must complete a background check and TB test prior to volunteering.

☐ I have read and understand the responsible adult partnership hours

Responsible Adult Meeting

A Responsible Adult Meeting will be held once a month on a day and time designated by your local Club. Your attendance counts as part of the volunteer hours needed. The meetings will inform a responsible family adult of changes that have or will take place at the Club, including information of any upcoming events or outings. The meetings are a forum for input and expression by a responsible adult. This is the best way for you to find out what is going on at the Club and in the community.

 \square I have read and understand the Responsible Adult meetings

Dress Code

Members, parents/guardians and volunteers are expected to respect our Clubs at all times; especially in the way of dress. Members are required to wear their membership shirt and membership card in order to enter the Club or participate in any Club activity. Additional shirts are available for purchase.

The following attire may not be worn at our Clubs:

- See-through or mesh clothing unless worn over other apparel.
- Garments that expose the midriff.
- Halter tops, tank tops, and "spaghetti" straps.
- Biking shorts or short that do not reach the fingertips of an extended arm.
- Bare feet at the Club or on any Club vehicle.
- Garments or accessories that display emblems relating to gangs, abusive substances, sex or obscenities.
- Tight fitting or revealing apparel.
- Sagging or other clothing deemed inappropriate by Club staff.
- Male and female Club Members are not allowed to wear hats.

☐ I have read and understand the dress code					
By signing below I agree that I have read and understa	and all of the above topics.				
Parent Signature	 Date				
Member Signature	 Date				
**************************************	SE ONLY*************				
Staff Initial	DATA ENTRY				
ORIENTATION DATE: Intake: □ Handbook Received MEMBERSHIP TYPE:	☐ Entered in KidTrax: Date/Staff Init ☐ Scanned ☐ Uploaded to portal ☐ Uploaded to TRAX ☐ Emergency Contact Card Made: Date/Staff Init				
DOCUMENTS RECD: □IEP □ Other ———————————————————————————————————	□ Member Card Made & Distributed: Date/Staff Init Membership #				

