Boys & Girls Club of Mount Vernon

Teen Program

September 5, 2018 – June 7, 2019

Registration is now open! Register early!





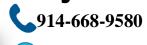
General Information

350 South Sixth Avenue Mount Vernon NY Ages: 14 – 20



Cost: \$25 per school year

Mondays – Fridays, 6:30 pm – 8:30 pm



💮 bgcmvny.org





Specialty Programs

Cheerleading, Dance, Karate,

Night Flight Basketball

Must be a registered Club Member Additional Days & Fees May Apply





Soys & Girls Club of Mount Vernon, Inc.

350 South Sixth Avenue, Mount Vernon, NY 10550 @ (914) 668-9580 @ Fax: (914) 668-1902 @ Website: www.bgcmvny.org

Teen Program Membership Application

Wednesday, September 5, 2018 – Friday, June 7, 2019

Member Information

| Name | | First | | | MI | Male | Female |
|---|---|-------------------------------|-------------|------------|--------------|--------------|-------------|
| Date of Birth | Age | | | School | | (circle one) | |
| A d-duooo | | | | | | pt# | |
| | | State Zip Home Phone (| | | • | | |
| Email Address: | | | | Tionic I | | / | |
| | | | | | | | |
| Parent/Guardian Inforn | <u>nation</u> | | | | | | |
| Female Guardian (circle or | <i>Mother</i> | Stepmot | her C | Other | | | |
| Name | | Place of | | | | | |
| Cell# () | | | | | | | |
| Male Guardian (circle one) | Father | Stepfath | er | Other | | | |
| | | - | | | | | |
| Cell# () | | | | | | | |
| Gross Household Incom Under \$15,000 Do you child quality for | \$15,000-\$25,000 free or reduced lunc | \$25,000-5 Shes at school? | No | Yes | 00-\$65,000 | Ove | er \$65,000 |
| Do you live in a single pIs your family a military | | a hase? | No No | Yes Yes | | | |
| Who do you live with? Mother Stepmot | Circle all that apply.) | Stepfather | | | Other | | |
| How many brothers do | | | | | | | |
| How many sister do you | | | | | | | |
| T Shirt Size (Please indi | cate the size T-shirt y | you wear.) | XS | S | М | L | XL |
| Emergency Contacts Give the names of at least | two individuals who | are available to | come to the | e Club in | case of emer | gency if t | he |

parents or guardians are not available. Please Print.

| | | () | |
|------|----------------------|-------|--|
| Name | Relationship to Teen | Phone | |
| | | () | |
| Name | Relationship to Teen | Phone | |





Teen Program Consent Form

Code of Conduct

- 1. Remove hats, headgear, and poor attitudes upon entering the Club.
- 2. Keep the Club clean; eat only in approved areas.
- 3. Respect others. Be kind with your words and actions.
- 4. Refrain from hanging out or roaming the hallways, bathrooms, stairwell, and offices.
- 5. Do not bring weapons of any kind into the Club.
- 6. Participate in gymnasium floor activities with sneakers, pants, or shorts and a top.
- 7. Refrain from disrupting or interfering in the management of the Club activities and events.
- 8. Refrain from engaging in destructive behavior such as activating the fire alarm.
- 9. Refrain from encouraging or participating in vandalism.
- 10. Refrain from possessing or using illegal drugs or alcohol.
- 11. Fighting will not be tolerated.

Membership Card

All members are given a membership card when they join the Club. Members must bring their card each day to the Club. If the membership card is lost, members can request a replacement. A fee of \$5 is charged for the replacement card. Allowing non-members to use the card may result in suspension.

Member's Pledge

I agree to obey the rules of the Club and be respectful of the staff and officers. I promise to be loyal to the Club, to allow no one to use my membership card, and to be careful to prevent damage to the building and equipment. I agree that my membership may be suspended or canceled at any time.

Signature of Club Member

Club Member

Date:

Parent's Consent

- I consent to my son/daughter participating in all activities and trips that form part of the Boys & Girls Club of Mount Vernon unless I notify the Club in writing.
- I consent to my son/daughter participating in the National Youth Outcome Initiative survey program unless I notify the Club in writing.
- I consent to the transportation of my son/daughter to and from all activities deemed necessary by authorized members of the Boys & Girls Club of Mount Vernon in conjunction with the program for which my son/daughter is enrolled.
- I give permission for my son/
- /or negligence that involve my son/daughter while participating in programs conducted by the Boys & Girls Club of Mount Vernon. daughter's likeness to be used in any Boys & Girls Club publication/video/web.
- I hereby release and discharge the Boys & Girls Club of Mount Vernon, staff members, volunteers, and Board of Directors from any liability in the event of an injury, accident, and
- **Emergency Medical Treatment**: I give authority to the Boys & Girls Club of Mount Vernon to obtain necessary emergency medical treatment for my child when necessary with the understanding the family will be notified as soon as possible.

Signature of Parent/Guardian

My signature below indicates that I have read and been given the policies of the BGCMV.

| Parent/Guardian Signature | | | Date: | | | | | |
|---------------------------|----------------|----------------|----------|---------------|--|--|--|--|
| Print Name | | | | | | | | |
| Office Use Only | | | | | | | | |
| Cash Check CC Money Order | Staff Initials | Amount Paid \$ | Receipt# | Date Received | | | | |
| | | | | | | | | |

