

# Summer Club Membership Application

**June 24, 2019 – August 09, 2019**

### Member Information

Name \_\_\_\_\_ Male Female  
Last First MI (circle one)  
 Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_  
 Address \_\_\_\_\_ Apt# \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_

### Parent/Guardian Information

**Female Guardian (circle one)**      **Mother**      **Stepmother**      **Other** \_\_\_\_\_  
 Name \_\_\_\_\_ Place of Employment \_\_\_\_\_  
 Cell# ( ) \_\_\_\_\_ Work# ( ) \_\_\_\_\_ Email \_\_\_\_\_  
**Male Guardian (circle one)**      **Father**      **Stepfather**      **Other** \_\_\_\_\_  
 Name \_\_\_\_\_ Place of Employment \_\_\_\_\_  
 Cell# ( ) \_\_\_\_\_ Work# ( ) \_\_\_\_\_ Email \_\_\_\_\_

### Family Information

- Gross Household Income *(please circle one)*  
 Under \$15,000      \$15,000-\$25,000      \$25,000-\$45,000      \$45,000-\$65,000      Over \$65,000
- Does your child qualify for free or reduced lunches at school?      No      Yes
- Does your child live in a single parent household?      No      Yes
- Is your family a military family not living on a base?      No      Yes
- Is any member of your household disabled?      No      Yes      Physical      Mental      Both  
(If yes, circle one)
- Who does your child live with? *(Circle all that apply.)*  
 Mother      Stepmother      Father      Stepfather      Grandparent      Other \_\_\_\_\_
- How many brothers does your child have? \_\_\_\_\_ What are the ages? \_\_\_\_\_
- How many sisters does your child have? \_\_\_\_\_ What are the ages? \_\_\_\_\_

### Who is authorized to pick up your child from the Club? *(Please Print)*

**Any person picking up your child from the Club must have a picture ID.**

( ) \_\_\_\_\_  
 Name Relationship to Child Phone  
 \_\_\_\_\_  
 Name Relationship to Child Phone

**My child can leave the Club and go home alone.**       Yes       No

T-Shirt Size *(please select one size child or adult)*      **Child**      XS      S      M      L      XL      **Adult**      XS      S      M      L      XL

**Office Use Only**

Cash       Check       CC       Money Order      Staff Initials      Amount Paid \$      Receipt#      Date Received



## #2: Code of Conduct

**This form must be read and signed by each Club member and Parent/Guardian.**

The Boys & Girls Club of Mount Vernon encourages youth to engage in positive recreation, education, and social & character development activities. It serves as a positive arena where young people can socialize, learn, have fun, and participate in activities especially designed for them. For these reasons – and for the safe secure management of the Club, the following Code of Conduct exists and will be enforce.

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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.

### 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.

### Suspension & Expulsion

At the discretion of onsite supervisory staff, members can and will be suspended (depending on the infraction) for a variety of days, weeks, months, or the entire program season if they knowingly and repeatedly violate the above mentioned rules. Members who knowingly violate the rules will be warned several times before they are considered for suspension. If a member is expelled for any infraction, no previous funds will be refunded.

When a suspended member returns to the Club, he/she is given a fresh start. No mention is made of the suspension to avoid pressure on the youth. The more serious and destructive actions can and will result in suspension for an entire program season or permanent expulsion altogether. The Chief Professional Officer or Executive Director can suspend a member for more than 30 days. Our policies are not designed to be punitive, but to encourage and reward positive behavior and hold youth members accountable for negative behavior. Permitting a program to function without rules presents risks to our members and staff, sets a poor example for our youth, and stands contrary to our mission of providing youth with a safe, clean, and positive environment where they come to learn, have fun, and meet people.

We hope both members and parents understand and support our effort to run a productive Club with quality programs by people who genuinely care about the youth and community.

### Member's Pledge

I hereby apply for membership at the Boys & Girls Club of Mount Vernon. 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.

### Signatures

Member: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

## #3: Club Policies

**This form must be read and signed by each Club member and Parent/Guardian.**

### Application Process

To become a member of the Boys & Girls Club of Mount Vernon, we must receive a complete application from each child. A complete application means that each section of the Registration Form must be complete. We must also receive a current physical, immunization record, and birth certificate. We will not accept incomplete applications. Payment must be received at the time the complete application is submitted. We will not accept an application without payment in full.

- **Summer Camp Program** – The age requirement for the Summer Program is 5 – 13 years. (There is no Teen Program during the summer.) The Registration Fee for the Summer Program is \$60. The cost of the program is \$100/week per child. If there is more than one child in a family, the cost for one child is \$100/week and \$95/week for each additional child.

### Mandatory Late Fee

Hours for Summer Program are 8:00 am – 4:30 pm. All children must leave the Club by 4:30 pm or a mandatory late fee will be charged. We will enforce a late fee of \$10 for every 10 minutes. For example, you will be charged \$10 if you pick up your child at 4:40 pm and \$20 if you pick up your child at 4:50 pm. The fee must be paid when you pick up your child or they cannot return the following day.

### NSF Charges

There is a \$35 fee for returned checks. If a check is returned, you will need to find another method of payment.

### Sign-in/Sign-out

All members must sign in when they arrive and sign out when they leave. Members are not allowed to leave the Club grounds on their own once they arrive and sign-in. If a different person other than the one listed on the application must pick up your child, you must notify the Club in advance with the name of the person. The person must have a photo ID when they come to pick up your child.

### Personal Information Regarding Members

The Boys & Girls Club of Mount Vernon will only give information about Club Members to the Parent/Guardian who registered the child. If the parent or guardian wishes the information to be released to others, the request must be submitted in writing or via court order.

### Personal Items

The Boys & Girls Club Mount Vernon strongly encourages members not to bring cell phones, iPads, or any other expensive personal items to the Club. The Club cannot assume responsibility for items that are lost, stolen, or misplaced.

### BGCMV T-shirts

One BGCMV t-shirt is included in the cost of the registration fee. Additional BGCMV t-shirts can be purchased at a cost of \$15 each. T-shirts must be worn during all Summer Program field trips. Members will not be allowed to participate in field trips if he/she is not wearing a BGCMV t-shirt. If member is not wearing a t-shirt, parent will be called and asked to pick up his/her child from the Club.

### Signature

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

## #4: Consent Form

**This form must be read and signed by Parent/Guardian.**

### Member Participation

- My child is allowed to engage in all activities and trips that form part of the Boys & Girls Club of Mount Vernon unless I notify the Club in writing.
- My child is allowed to participate in the National Youth Outcome Initiative survey program unless I notify the Club in writing.
- I consent to the transportation of my child 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 child is enrolled.
- I understand and agree that if my child is transported to and from the Club, he/she must be picked up by closing time or a mandatory late fee will be charged for waiting staff.
- I give permission for my child's likeness to be used in any Boys & Girls Club publication/video.
- 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/or negligence that may involve my child while participating in programs conducted by the Boys & Girls Club of Mount Vernon.

### Extra Charges

- I understand that all Summer Program members must leave the Club by 4:30 pm. I understand that a mandatory late fee of \$10 for every 10 minutes will be charged if my child remains at the Club beyond the time that he/she should leave. I consent to paying the fee before my child can return to the Club.
- I understand that I have the option of participating in the Optional Early Drop Off Program. If I choose to enroll my child in this program, I understand that there is an additional weekly fee of \$50/week per child. I understand that this fee must be paid the week prior to my child being dropped off early.
- I understand that there is a \$35 fee for returned checks. If I submit a check for payment that is returned, I consent to paying the NSF charges and I will pay future fees in cash.
- I understand that all Club members must bring their membership cards with them each day to the Club. If a membership card is lost or stolen, I understand that there is a \$5 charge for a replacement card.

### Sign-in/Sign-out Procedures & Personal Information

- I understand that all members must sign in when they arrive and sign out when they leave the Club. I understand that members are not allowed to leave the Club grounds on their own once they arrive and sign-in unless I have notified the Club in writing or on this application.
- I have indicated in this application how my child is allowed to leave the Club. I understand that if a different person other than the one listed on this application must pick up my child; I must notify the Club in advance with the name of the person. The person must have a photo ID when they come to pick up my child.
- I understand that the Boys & Girls Club of Mount Vernon will only give information about my child to the person who signs this form. If I want the information to be released to others, the request must be submitted in writing or via court order to the Club in advance.

### Signature

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

## #5: Medical Information for Parent/Guardian

*This form is to be completed by a parent or guardian. Please answer these questions about your child.*

**Is your child Hispanic/Latino?** (please check one)

Yes

No

**Race** (Check ALL that apply)

American Indian

Asian

Black

White

Native Hawaiian/Other Pacific Islander

Other \_\_\_\_\_

### Medical History

Ear Infections	No	Yes	If yes, last known date	____/____/____
Rheumatic Fever	No	Yes	If yes, last known date	____/____/____
Convulsion	No	Yes	If yes, last known date	____/____/____
Diabetes	No	Yes	If yes, last known date	____/____/____
Behavior	No	Yes	If yes, last known date	____/____/____

### Allergies

Hay Fever	No	Yes	If yes, last known date	____/____/____
Ivy Poisoning, etc.	No	Yes	If yes, last known date	____/____/____
Insect Stings	No	Yes	If yes, last known date	____/____/____
Penicillin	No	Yes	If yes, last known date	____/____/____
Other Drugs	No	Yes	If yes, last known date	____/____/____

### Diseases

Chicken Pox	No	Yes	If yes, last known date	____/____/____
Measles	No	Yes	If yes, last known date	____/____/____
German Measles	No	Yes	If yes, last known date	____/____/____
Mumps	No	Yes	If yes, last known date	____/____/____
Asthma	No	Yes	If yes, last known date	____/____/____

### Significant Health Info/Current Conditions

**Does your child have chronic or recurring illnesses?** *Please print.* **No** **Yes**  
 If so, please list them here. \_\_\_\_\_

**Has your child had any contagious illnesses?** *Please print.* **No** **Yes**  
 If so, please list them here. \_\_\_\_\_

**Has your child had serious injuries?** *Please print.* **No** **Yes**  
 If so, please list them here. \_\_\_\_\_

**Has your child had any surgeries?** *Please print.* **No** **Yes**  
 If so, please list them here. \_\_\_\_\_

**Has your child been hospitalized?** *Please print.* **No** **Yes**  
 If so, please list them here. \_\_\_\_\_

## #5: Medical Information for Parent/Guardian, (cont'd)

**Does your child take medications?** *Please print.* **No** **Yes**  
 If so, please list them here. \_\_\_\_\_

**Does your child wear glasses, contact lens, or any other medical equipment?** **No** **Yes**  
 If so, please list them here. *Please print* \_\_\_\_\_

**Does your child have any conditions that would modify his/her activity at the Club?** *If yes, please list them here. Please print.* **No** **Yes** \_\_\_\_\_

**Does your child have allergies?** *Please print.* **No** **Yes**  
 If yes, please list them here. \_\_\_\_\_

**Are there any foods that your child should not eat?** *Please print.* **No** **Yes**  
 If yes, please list them here. \_\_\_\_\_

**Does your child have any other medical conditions of which we should be aware?** *If yes, please list them here. Please print.* **No** **Yes** \_\_\_\_\_

### Consent for Emergency Treatment

I give authority to the Boys & Girls Club of Mount Vernon to obtain necessary emergency medical treatment for my child with the understanding the family will be notified as soon as possible.

\_\_\_\_\_  
 Signature Date Phone ( )

\_\_\_\_\_  
 Print Name Relationship to Child

### Emergency Contacts

Give the names of at least two individuals who are available to come to the Club in case of emergency if the parents or guardians are not available. *Please Print.*

\_\_\_\_\_  
 Name Relationship to Child Phone ( )

\_\_\_\_\_  
 Name Relationship to Child Phone ( )