

Summer Club Membership Application

June 27, 2022 – August 12, 2022

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 65 yrs. or older? 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

<input type="checkbox"/> Cash	<input type="checkbox"/> Check	<input type="checkbox"/> CC	<input type="checkbox"/> Money Order	Staff Initials _____	Amount Paid \$ _____	Receipt# _____	Date Received _____
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#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.

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 Executive 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 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 \$100. The cost of the program is \$110/ per Club member a week per child. \$120/ per non-Club member per week. If there is more than one child in a family, each additional child cost \$100/week.

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 give permission for my child to participate in the OJJDP Mentor Program offered by Boys & Girls Club of Mount Vernon, NY Inc.
- 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 4:00 pm. I understand that a mandatory late fee of \$10 after 4:05 pm and \$20 after 4:16 pm, and \$25 will be charged at 4:30 pm. Repeat lateness will result in child not being able to return to the program. minutes will be charged if my child remains at the Club beyond the time that he/she should leave. Repeat lateness may result in the child being asked not to return to the program.
- 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 ()

Minor Participant Waiver, Release, Indemnification of All Claims & Covenant Not to Sue

NOTICE: THIS IS A LEGALLY BINDING AGREEMENT. Read this document carefully and in entirety. By signing this agreement, you give up your right and the named minor's right to bring a court action to recover or obtain any child's remedy for any personal injury or property damage however caused arising out of the named minor's participation in Boys & Girls Club of Mount Vernon, NY Inc. Programs, now or any time in the future.

Acknowledgment of Risk

I, in my legal capacity as the parent/guardian of the minor named below, do hereby acknowledge and agree that participation in Boys & Girls Clubs of Mount Vernon NY, Inc. activities comes with inherent risks. I have full knowledge and understanding of the inherent risks associated with Boys & Girls Clubs of Mount Vernon, NY Inc. programs participation, including but in no way limited to: (1) slips, trips, and falls, (2) aquatic injuries, (3) athletic injuries, and (4) illness, including exposure to and infection with viruses or bacteria. I further acknowledge that the preceding list is not inclusive of all possible risks associated with the Boys & Girls Club of Mount Vernon, NY Inc. programs participation and that said list in no way limits the operation of this Agreement.

Coronavirus / COVID-19 Warning & Disclaimer

Coronavirus, COVID-19 is an **extremely contagious** virus that spreads easily through person-to-person contact. Federal and state authorities recommend social distancing as a mean to prevent the spread of the virus. **COVID-19 can lead to severe illness, personal injury, permanent disability, and death. Participating in [insert organization] programs or accessing [insert organization] facilities could increase the risk of contracting COVID-19.** The Boys & Girls Club of Mount Vernon, NY Inc. in no way warrants that COVID-19 infection will not occur through participation in the Boys & Girls Club of Mount Vernon, NY Inc. programs of accessing the Boys & Girls Club of Mount Vernon, NY Inc. facilities.

Waiver, Release, Indemnification & Covenant Not to Sue

In consideration of _____'s participation in the Boys & Girls Club of Mount Vernon, NY Inc. programs, I, _____, the parent/guardian of the minor named above, agree to release and on behalf of myself and the minor named above, my heirs, representatives, executors, administrators, and assigns, **HEREBY DO RELEASE** the Boys & Girls Club of Mount Vernon, NY Inc. its officers, directors, employees, volunteers, agents, representatives and insurers ("Releasees") from any causes of action, claims, or demands of any nature whatsoever including, but in no way limited to, claims of negligence, which I, the named minor, my heirs, representatives, executors, administrators and assigns may have, now or in the future, against the Boys & Girls Club of Mount Vernon, NY Inc. on account of personal injury, property damage, death or accident of any kind, arising out of or in any way related to the use of the Boys & Girls Club of Mount Vernon, NY Inc. facilities/equipment or participation in the Boys & Girls Club of Mount Vernon, NY Inc. programs whether that participation is supervised or unsupervised, however the injury or damage occurs, including, but not limited to the negligence of Releasees.

In consideration of my child's participation in the Boys & Girls Club of Mount Vernon, NY Inc. I, the undersigned parent/guardian of the named minor, agree to **INDEMNIFY AND HOLD HARMLESS** Releasees from any and all causes of action, claims, demands, losses, or costs of any nature whatsoever arising out of or in any way related to the named minor's Boys & Girls Club of Mount Vernon, NY Inc. programs participation.

I hereby certify on behalf of myself and the named minor that I have full knowledge of the nature and extent of the risks inherent in the Boys & Girls Club of Mount Vernon programs participation and that I, on behalf of myself and the named minor, am voluntarily assuming said risks. I understand that I and the named minor will be solely responsible for any loss or damage, including personal injury, property damage, or death, the named minor sustains while participating

in the Boys & Girls Club of Mount Vernon, NY Inc. programs and that by signing this agreement I, on behalf of myself and the named minor, **HEREBY RELEASE** Releasees of all liability for such loss, damage, or death. I further certify that my child is in good health and has no conditions or impairments which would preclude his/her safe participation in the Boys & Girls Club of Mount Vernon, NY Inc. programs.

I further certify that my child's of birth is _____ (MM/DD/YYYY), that my present age is _____, that I am therefore of lawful age (18 years or older) and otherwise legally competent to sign this agreement, and that I have legal capacity to act as the parent/guardian of the named minor. I further understand that the terms of this agreement are legally binding and certify that I am signing this agreement, after having carefully read it, of my own free will.

Child Name (Print Clearly)

Date

Parent/Guardian Signature

Parent/Guardian Name (Print Clearly)

Summer Program weeks

Please indicate which program weeks you are registering for. (Please note that there are no partial weeks. Check as many boxes as apply.)

<input type="checkbox"/>	Week 1	June 27-July 1	<input type="checkbox"/>	Week 5	July 25-29
<input type="checkbox"/>	Week 2	July 5-8 (closed July 4)	<input type="checkbox"/>	Week 6	August 1-5
<input type="checkbox"/>	Week 3	July 11-15	<input type="checkbox"/>	Week 7	August 8-12
<input type="checkbox"/>	Week 4	July 18-22			

PAYMENT

Program Fees:

Day Program (\$120 tuition per week) 5-13 yrs. old \$120 X _____ (# of weeks) = _____

ASP Members pay by: June 10th (\$750), June 24th (\$775), June 27th (\$800)

Non-Members pay by: June 10th (\$800), June 24th (\$850), June 27th (\$900)

Total Due:

Total = _____

I would like to pay:

Program Fees: \$ _____ X number of weeks: \$ _____

Balance in full (See above to calculate total for desired program weeks)

Enclosed is my check in the amount of: \$ _____

Please bill my credit card the following amount: \$ _____

Name on Card: _____ Circle: MasterCard VISA Discover Amex
 Credit Card #: _____ Exp. Date: _____ CSV: _____ Signature: _____

Cancellations accepted up to one week prior to the start of the program. Cancellations will result in the forfeiture of the non-refundable deposit per week. Also, you can make additional payments on our website at www.bgcmvny.org The BGCVMV cannot guarantee placement if balances and required forms are outstanding after payment deadline.

Covid-19 Safety Precautions: Health and Hygiene

The BGCVMV is committed to providing all members with a safe environment by ensuring each person who enters the site abides by the Hygiene and Health Policy. The COVID-19 pandemic has affected society in an unprecedented fashion. Significant adjustments are essential to ensure we continue to keep all our members and families safe.

All staff members shall abide by local and state government mandates regarding COVID-19. Staff shall ensure Club members are always following our guidelines.

I have read, understand, and agree to the terms of this application.

Parent/Guardian Signature: _____ Date: _____

PLEASE MAIL OR DROP OFF REGISTRATION FORM WITH PAYMENT AT Boys & Girls Club of Mount Vernon NY Inc., 350 South Sixth Avenue, Mount Vernon NY 10550, OR FAX TO 914-668-1902. YOU CAN ALSO EMAIL IT TO DMckenzie@bgcmvny.org