

### **Boys & Girls Club of Poplar Bluff** 2017 Summer Membership Application

## ENROLLMENT REQUIREMENTS

For All School Aged Youth Seeking Membership:

- Complete ALL three pages of the BGCPB 2017 Summer Camp Membership Application
- Members must clear up any past balances before enrollment
- Members with state-paid Day Care must provide BGCPB with documentation PRIOR TO ENROLLMENT: contact your caseworker, and make sure that your BEGIN DATE and END DATE cover all weeks of Summer Camp (June 5<sup>th</sup> - August 4<sup>th</sup>).
- Pay enrollment fee of \$60 (\$60 weekly or \$15 per day) or if your child has SPDC, the enrollment would be the sliding fee for 5 days. Enrollment fee covers first week attended. (Example: \$1.00 per day = \$5.00 weekly fee)
- If your child has special health or medical requirements we must have a specialized care plan provided by your child's doctor prior to enrollment.
- Parent/Guardian must attend a Mandatory Orientation every
   Summer Camp your child is enrolled, no exceptions. Forms will
   only be accepted during orientation times; forms sent by fax
   cannot be accepted.
- For returning parents, please allow at least 15 minutes for our new location orientation.

OPEN ENROLLMENT Orientations will begin on Monday, May 1<sup>st</sup> -Thursday, May 4<sup>th</sup> at noon and 6:00 p.m. at 1306 Victory Lane (Middle School Campus Annex).

If you have any questions please contact BGCPB at 776-1690.



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| To be completed by club staff only—Please do not mark in this box.  |                            |                                       |               |  |
|---|----------------------------|---------------------------------------|---------------|--|
| Date Returned: Memb   | er Number:                 | New: Rene                             | ewal:         |  |
| Enrollment Fee Fully Paid: Yes/No   | Sliding Fee:               | Ctoff Initials                        |               |  |
| Rec # Check #<br>Summer School: Yes/No School Atter   | AMOUNT: <u>\$</u><br>nding | Staff Initials:_<br>lune Onlyluly Onl | y Both        |  |
| Called (Contact): Date:   | Answe                      | ered / Left Message / N               | o Answer      |  |
| Please print or mark appropriate answer to all questions.   |                            |                                       |               |  |
| Member Information:   |                            | •                                     |               |  |
| Child Name:   |                            |                                       |               |  |
| (First)   | (Middle)                   | (Last)                                |               |  |
| Date of Birth:// Age:   | Grade from                 | 16-17 School Year                     | _ Male/Female |  |
| Number of years your child has been a member of Boys & Girls Club:  |                            |                                       |               |  |
| Ethnicity: Asian American Indian  | n African Ame              | rican Caucasian/White                 |               |  |
| Hispanic/Latino B   | i-Racial                   | Other                                 |               |  |
| Address:  |                            |                                       |               |  |
| (Street)  | (City)                     | (State)                               | (Zip)         |  |
| Email Address (if applicable):  |                            |                                       |               |  |
| Parent/Guardian Contact Infor   |                            |                                       |               |  |
| Parent/Guardian Name:   |                            | Relationship:                         | <u> </u>      |  |
| Phone:()Cell Phone:(  | )                          | _Employer:                            |               |  |
| Parent/Guardian Name:Relationship:  |                            |                                       |               |  |
| Phone:()Cell Phone:(  | )                          | _Employer:                            |               |  |
| Member Lives With:  |                            |                                       |               |  |
|   |                            | Both Parents:                         |               |  |
| Parent & Step-Parent: Gra   | ndparent:                  | Other:                                |               |  |
| How Many Live In Your House? (Family Size)  |                            |                                       |               |  |
| <b>Emergency Contacts &amp; Persons Aut</b>   | horized to Trans           | port Member From the F                | acility:      |  |
| Name:   | _Relationship:             | Phone:                                |               |  |
| Name:   | _Relationship:             | Phone:                                |               |  |
| Name:   | _Relationship:             | Phone:                                |               |  |
| **If additional persons are allowed to transport member, please provide the required information on another sheet and attach it with your membership form |                            |                                       |               |  |



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| riease Check All That Apply to Your Family:   |
|---|
| Qualify for Free Lunch OR Reduced Lunch:  |
| Parent or Guardian Currently in the Military, if yes which branch:  |
| Live in Public Housing Area (If so, please provide the name):   |
| Does your child have an IEP (individualized education plan) or attend specialized classes for behavior management? Please Circle: YES NO  |
| Does your child have a companion aide at school? YES NO   |
| Annual Household Income:  |
| Authorization For Emergency Medical Care  |
| Name of Family Physician: Phone:  |
| Name of Preferred Hospital:Phone:   |
| special needs:  |
| *Please Note that the above personal information is vital and necessary for our records and the funding that our organization receives. The answers you provide will be kept completely confidential. Your cooperation for providing this information is both appreciated and important.  You can help send another child to Boys & Girls Club! We are asking everyone: Please sponsor one week (\$60.00) for a child that would be home alone or on the streets this summer if not for Boys & Girls Club. Thank you for helping make a difference in a child's life! |
| Yes, I would like to sponsor a child for one week of summer camp.   |



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#### **Authorization for School Release**

I give permission to Poplar Bluff R-1 School District and Sacred Heart School to share all grade reports with the Boys & Girls Club of Poplar Bluff to further enhance my child's education. I give permission for PB R-1 School District to release any information to BGCPB. I give permission for the BGCPB to communicate with my child's teacher, view and copy grade reports, and discuss strategies that will help my child to become a successful student.

I understand that Boys & Girls Club of Poplar Bluff is not responsible for personal injury or lost or stolen property. By signing this form, I agree to allow my child to be photographed, videotaped, or interviewed for Boys & Girls Club media purposes only. Having been informed that Boys and Girls Club of Poplar Bluff provide supervised athletic, recreational, educational, cultural, and guidance programs for boys and girls, I/We, the Parent/Guardian of the child above, named candidate for membership in Boys & Girls Club of Poplar Bluff, do hereby agree and give consent for his/her participation in any and all activities conducted by the club while he/she is a member. In consideration of permission given to my child/children listed below by the Boys & Girls Club of Poplar Bluff, to participate in all activities, I release and discharge the BGCPB, its agents, employees, commissioners, and officers, from all claims, demands, actions, judgements, and executions, which I ever had, or now have, or may have, or which my heirs, personal representatives, or assigns may have or claim to have against the Boys & Girls Club of Poplar Bluff, its successors, or assigns for personal injuries to my child listed below, known or unknown and injuries to property, real or personal, caused by, arising out of, the activity or activities offered by the Boys & Girls Club of Poplar Bluff. I/We likewise release from responsibility any person transporting my/our child to or from all activities sponsored or conducted by Boys & Girls Club of Poplar Bluff. I/We agree that the Boys & Girls Club of Poplar Bluff may transport my child off the 1306 Victory Lane campus (examples Annex, field trips, Bacon Park, etc.) I have read this release and understand all its terms. I sign it voluntarily and with full knowledge of its significance. I consent to my child participating in all activities as stated above and assumed all risks.

I have received a copy of this facility's policies pertaining to the admission, care and discharge of the children. I have been informed that a copy of the licensing rules for child care homes or the licensing rules for group child care homes and centers is available at this facility for review. The provider and I have agreed on a plan for continuing communications regarding my child's development, behavior and individual needs. When my child is ill, I understand and agree that s/he may not be accepted for care or remain in care. I understand that, before the first day of attendance by my child, I will provide proof of completed age appropriate immunization or exemption from immunizations. I understand that I have the right to request notice of whether there are any children enrolled at our facility with immunization exemption on file.

I give my permission to the Boys & Girls Club of Poplar Bluff to collect information via online or written surveys, questionnaires, interviews, and focus groups from the minor child listed on this application. Any and all information received will be kept strictly confidential. Data gathered through these means will be summarized in the aggregate and will exclude all references to any individual responses. The aggregated results of these analyses may be shared with Club staff, Boys & Girls Clubs of America (BGCA), funders, and other community stakeholders to evidence program effectiveness and/or Club impact on our members.

I understand that the Boys & Girls Club of Poplar Bluff may share information about the minor child listed on this application with Boys & Girls Clubs of America (BGCA) for research purposes and/or to evaluate the program's effectiveness. Information that will be disclosed to BGCA may include the information provided on this membership application form, information provided by the minor child's school or school district, and other information collected by Boys & Girls Club of Poplar Bluff, including data collected via surveys or questionnaires. All information provided to BGCA will be kept confidential.

| Parent/Guardian's Signature: | Date: |
|------------------------------|-------|
|                              |       |