	FOR	OFFICE USE O	NLY				
Membership #: Group Na				ıs #:	_ Di	smissal Bus #:	
Membership Am	ount: \$	Fre	quency:				
Applied for Scholarship: Yes $\Box$ No $\Box$ S	Scholarship	Approved: Yes	] No 🗍 ]	f Yes, Amou	nt Awa	rded: \$	
	· ·						
			<u></u>				
		F COLLIER COUNT					
Apr	olication	n for Meml	bershi	ip			
11	-	MER CAM		-			
NOTICE. Annihisation does				1 Food at	10 11 0	n-rofundali	0
NOTICE: Application does	noi zuu	INILLE UNM	133101	1. I CES UI	c 1101	n−r¢junuuUl	i.
Has your child ever attended a BGCCC	Program	2 V-	-				
5	U						
Which location are you applying for: N	-						-
How did you hear about us?Frien	nd/Family	Social I	Media	Maga	azine	Kadio	Event
	,					I _	
Child's Full Name:		Date of Birth:				Gender:	
School ID/Land March		Lact C.1. 1.4.	on 1 1			Male 🗆 Fe	
School ID/Lunch Number:		Last School Att	ended:			Last Grade Con	pleted:
Race: Asian  Black/African American  Ir	ndian/Alaska	an Native □	Ethnici	ty: Hispanic	/Latino	□ Non-Hispan	ic/Latino □
White/Caucasian  Multi-Racial Other:				, inspand		1.0111102011	-,U
Primary Language:			Other I	anguages:			
English $\Box$ Spanish $\Box$ Haitian Creole $\Box$ Oth	ner:				n□ H	aitian Creole 🗆	
<b>Receives ELL services at school:</b> Yes  No			0				
This information is for planni						oility or status.	
<b>Reason for Joining Club:</b> Social Recreation  Ac	cademic Supp	port $\Box$ Sports $\Box$ C	College & O	Career Explora	tion		
□ Special Interest Activities: <i>Check all</i> Music	Dance	_Culinary Th	eater	_ArtPing	Pong	Technology	
Specific Learning/Behavior Concerns:							
$EH \square$ SLD $\square$ ADD $\square$ ADHD $\square$ ODD	□ Other:						
Supports Received: Please include copy of plan.							
IEP □ 504 Plan □ Behavior Plan □ Counselin	0						
Interested in receiving information regarding fre	e counseling	g services? Yes 🗆					
Child's Social Security Number, if available:		Receives free or redu					
					Lunch	Reduced Cos	t Lunch 🗆
		EDICAL INF	URMA	TION	<u> </u>		
Name of Child's Physician/Medical Care Provider:	:	Phone:			Fax	c	
Permission to contact Doctor/Hospital in case of a	Child's Ma	dical Insurance Pr	ovider		Polic	y Number:	
ermission to contact Doctor/Hospital in case of a edical emergency: Yes No		Group Number:					
Medications: If Yes, please list.				r Medical Informati	on:		
Yes  Yes  Yes			$\Box$ Asthma $\Box$ Physical Disability				
No 🗆	No 🗆	•. •	•		🗆 Di	abetes Other	
Medical or Dietary Information Necessary in an E	mergency S	ituation: If Yes, p	lease list.				
Yes 🗆		1					



	PARENT/GU	JARDIA	AN INFOR	MATION		
	PARENT INFORMA		-			
	a COURT ORDER stating visit COURT ORDER to be ON FILE					
Primary Parent or Guardian:		Home Phone:		Cell Phone:	Permission for Text	
					Communications:	
Address:	City:	State:		Zip:	Yes No C Email (REQUIRED):	
Employer/School:	5	Employer/School Phon		-	Fax Number:	
		Employe	/School I hone	(include ext.):	rax Number.	
Employer/School Address:		City:		State:	Zip:	
Secondary Parent or Guardian:		Home Phone:		Cell Phone:	Permission for Text	
					<b>Communications:</b> Yes $\Box$ No $\Box$	
Address:	City:	State: Zi		Zip:	Email:	
	HOUSEH	HOLD I	NFORMA	ΓΙΟΝ	I	
This info	rmation is for planning purpo	oses and doe	es not determine	membership eligibility	or status.	
The Club Member lives with: Check	$all \square Mom \square Dad \square St$	ep Mom	$\Box$ Step Dad $\Box$	Grandparent 🛛 Guard	lian 🗆 Other	
Single Parent: 🗆 Y	es 🗆 No <b>Parent in Milita</b>	ry? 🗆 Yes	lf yes, list branch	1:	□ No	
Number of people living in househ	old:	Annual l	Household Inco	me: \$		
Current Head of Household: Male	□ Female □		Number o	f members in househol	d age 18 or younger:	
Anyone in household handicapped:       Yes       No       Number of members in household age 65 or older:				d age 65 or older:		
E	MERGENCY CONT	ГАСТ &	PICK-UP	INFORMATIO	N	
Pers	on(s) to Whom the Child I Besides Pa		leased/Emerge rdians Listed A		tion	
Name	Phone	Emergency Contact		Pick-up Authoriza	tion Relation to Child	
		Yes 🗆 No 🗆 Yes 🗆 No 🗆				
		Yes □ No □ Yes □ No □				
		Yes [	Yes 🗆 No 🗆 Yes 🗆 No 🗆			
	MEMBE	RS 16 &	OLDER C	DNLY		
	PERMISSION TO WAL	K, DRIVE	A CAR, OR R	IDE A BIKE HOME		
· · ·	-		s & Girls Club	is not responsible for	him/her after they leave the	
(Please Check One)	program. Once the child checks out, he/she may not check back in. (Please Check One)					
, ,	ermission for my teen child	d to check	out their young	ger siblings: $\Box$ Y	es 🗆 No	
I <u>DO NOT</u> give permissio	on for my child to check hi	im/herself	out.			

#### LATE PICKUP:

The Boys & Girls Club Summer Camp closes promptly each day at 6:00pm. Pickup after the posted closing time is considered late. For any child remaining after closing time, a late fee of \$1.00 per minute, per family, will be charged. The late fee must be paid in full before the child may return to the program. There will be no exception to this policy. We will notify the appropriate authorities for any child remaining 30 minutes after close of business. As the Parent/Guardian, I agree that I am responsible for picking up special notices and flyers each day which will alert me to any changes in scheduling. If someone else is picking up my child(ren), I agree that they are responsible for picking up notices and flyers. I understand that if I am frequently late, my child's membership may be revoked without refund.

## TRANSPORTATION/FIELD TRIP AUTHORIZATION

I hereby give my permission for my child to participate in the activities and programs of the Boys & Girls Club that necessitate transportation in vehicles. I understand that often local day trips will be unannounced. Out of town trips will be posted in advance. I understand that all trips will be under the supervision of the Boys & Girls Club Staff. I will not hold the Boys & Girls Club responsible in case of an accident. Notice of all trips will always be available at the administrative office.

SWIMMING AUTHORIZATION I hereby give my permission and full consent for my child to participate in swimming activities at local beaches and at local pools as conducted by the Boys & Girls Club. I hereby fully release, and shall in the future release, the Boys & Girls Club of Collier County and its Directors, Instructors, Officers and Staff, from any cause of action, claim or liability for damages or expenses, including but not limited to any claims for personal injuries resulting or arising out of any swimming activity or related activities.

Parent/Guardian Signature:

Parent/Guardian Signature:

### BOYS & GIRLS CLUB RIGHT TO REFUSE PICK UP OF CHILD

I understand the Boys & Girls Club may refuse to allow my child to be transported home by anyone (including myself) that they feel may have their driving ability impaired due to drugs or alcohol or other circumstances. I understand that this is for safety reasons only and that the Boys & Girls Club will contact another authorized individual included on this application to pick up my child. I further agree that any late fees incurred because of the situation will be my responsibility.

Parent/Guardian Signature:

Parent/Guardian Signature:

COMPUTER USE AUTHORIZATION

I hereby give my permission for my child to participate in the activities and programs of the Boys & Girls Club that use the internet. I understand that all computer use will be under the supervision of the Boys & Girls Club Staff. I understand my child may only go to internet sites that are pre-approved by the Boys & Girls Club Staff. Any inappropriate use of the computer will result in suspension and may result in my child's membership to be revoked.

**EXCHANGE OF INFORMATION WITH SCHOOLS** I give permission to the Boys & Girls Club of Collier County and the Collier County School District to exchange information regarding the minor child listed on this application. The purpose of the exchange is to help both organizations to do a better job of helping the student be successful in school, in the Boys & Girls Club and in life. This release is valid for one year and may be revoked at any time by contacting Collier County School District or the Boys & Girls Club of Collier County in writing.

Parent/Guardian Signature:

# SURVEYS & QUESTIONNAIRES AUTHORIZATION

I, the parent/guardian of the minor child listed in this application, give permission for the Boys & Girls Club of Collier County to Survey my child about his or her Club experience, behaviors, skills and attitudes using Boys & Girls Clubs of America's National Outcomes Survey or other survey instruments.

BOYS & GIRLS CLUB OF AMERICA I give permission to the Boys & Girls Club of Collier County to share information about the minor child listed on this application with the Boys & Girls Club 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 data collected via surveys or questionnaires. All information provided to BGCA will be kept confidential.

Parent/Guardian Signature:

Parent/Guardian Signature:

#### YOUTH RELATIONS DEPUTY COUNSEL

Youth Relationship Deputies are on site on certain days supporting programs and assisting youth in any manner possible. At times a Youth Relationship Deputy may be asked to assist in counseling a member along with Boys & Girls Club staff.

Parent/Guardian Signature: \_\_\_\_

#### PHOTO/VIDEO RELEASE

3

I understand that from time to time, the Boys & Girls Club will have publicity photos/videos taken during programming for use in local media, brochures and on their website. I give permission for my child to be included in all photo opportunities.

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

Date:

Date:

Date:



Date:

\_\_\_\_\_Date: \_\_\_\_\_

Date:

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

Date:



# MENTORING PARENT/GUARDIAN CONSENT FORM

To provide better services for our Club members, the Boys & Girls Club of Collier County will be offering children the opportunity to participate in an onsite Mentoring Program. Mentors are adults from within the Boys & Girls Club staff or volunteers from the community who would like to spend extra time with members to help them in various ways such as with school work, issues regarding relationships with teachers and friends and to get to know each member and their personal goals and interests. The purpose of this form is to give permission for your child to participate in this Mentoring Program.

I, the parent or legal guardian of \_\_\_\_\_\_, hereby give my permission for my child to participate in the Mentoring Program at the Boys & Girls Club.

I fully understand that the program involves mentors, who shall be selected from the staff and community and will be screened (including a criminal background check) and trained before beginning in the program. A mentor will be expected to meet with my child on a regular basis on-site at the Boys & Girls Club. The mentor is not allowed to take or meet my child beyond the Club facility or to contact them in any way outside of the Boys & Girls Club of Collier County such as phone calls, emails or internet contact.

I understand that my child will participate in an orientation session at the Club in which the program will be explained. The program is planned to last one year and continuation may then be discussed.

I understand that during the course of 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 give the Boys & Girls Club Volunteer & Community Partnership Director permission to obtain my child's academic and attendance records from my child's school.

I permit the Mentoring Program staff and the Boys & Girls Club to utilize photographs of my child taken during his/her involvement in the mentoring program and waive all rights of compensation.

Parent/Guardian Name (Print Clearly)

Parent/Guardian Signature

Childs Name (Print Clearly)

Date



# **BUS / VAN POLICY**

While at the Club, we expect your child to be on their best behavior while in our busses or vans and adhere to school bus policy. Members must sit down, talk quietly and follow the driver's directions. Failure to do so may result in suspension from the bus which will be given at the driver or staff's discretion. Should a member receive a suspension, that member will lose the right to ride the bus for a period of time; to the Club, from the Club and on field trips. Parents will be informed accordingly.

## **Bus / Van Rules and Expectations:**

- 1. Backpacks should be taken off before sitting in a seat.
- 2. Members must walk to and from the bus.
- 3. Members must keep all hands and legs to themselves and out of the aisles.
- 4. Remain seated at all times; do not stand up until driver dismisses you.
- 5. Use indoor voices when on the bus; foul language will not be tolerated.
- 6. Eating and drinking is not permitted on the bus.
- 7. Keep all body parts inside the bus; not out the window (this includes garbage).
- 8. Crawling under / over bus seats for any reason is dangerous and prohibited.
- 9. Parents will be responsible for all cost of repairs and damages that may occur.

# Consequences for not following these Rules:

1<sup>st</sup> offense: Member to speak with staff – contract sent to parents for signature

2<sup>nd</sup> offense: Driver/BGC staff issue an incident report – parent notified of next step

3<sup>rd</sup> offense: automatic one (1) day suspension from bus

- 4<sup>th</sup> offense: automatic three (3) day suspension from bus
- 5<sup>th</sup> + offenses: permanent removal from bus

## The following situations will result in automatic suspension from bus and Club:

- 1. Physical threat or harm to other members and / or driver
- 2. Fighting, smoking, drugs or inappropriate touching while on bus
- 3. Damage to property
- 4. Constant disobedience
- 5. Bullying

Boys & Girls Club of Collier County's #1 priority is the safety of all members. Please speak with your child(ren) in regards to the seriousness of appropriate bus behavior.

Parent/Guardian Name (Print Clearly)

Parent/Guardian Signature

Childs Name (Print Clearly)

Date



# Distance-Based Learning Parent/Guardian Letter For use with Zoom and Remote Programming

In an effort to continuously serve members, Boys & Girls Club of Collier County is providing virtual Club experiences through which Club staff will facilitate program activities through online platforms, including Zoom. Boys & Girls Club of Collier County will use online platforms for members, parents/guardians and/or staff to use for communication and programming.

This letter seeks consent for your child to utilize Zoom and other platforms for distance-based Club program purposes. Zoom provides an opportunity to deliver video and chat-based educational experiences to members via any device. Zoom collects information about its users and has its own privacy terms and conditions to which members must adhere. Zoom's privacy terms and conditions can be viewed at: <u>http://zoom.us/terms</u> and <u>http://zoom.us/privacy</u>.

In order to participate in virtual-based Club experiences, your child will need to have a computer, mobile phone, or tablet device with access to the internet. School district provided computers will work.

To register for Zoom go to <u>www.zoom.com</u>. You will need to provide some data, including your email address and first and last name. Zoom is free of charge.

We will use Zoom for the following anticipated program activities:

- Mentoring & Group Learning Activities
- Homework Help & Video Conferencing
- Media sharing (for example, uploading images of artwork or other projects)

In addition to Zoom, other learning platforms may occasionally be used. These include Facebook, YouTube, Kahoot, Padlet, and others.

Our commitment to keeping the young people we serve safe is always our number one priority. Boys & Girls Club of Collier County will actively monitor member activity on our virtual platforms and will make every effort to protect member information. Further, all activities online must comply with Boys & Girls Club of Collier County's safety policies, including the Code of Conduct, Acceptable Use Policy, Internet Safety Policy, and Prohibition of 1:1 Contact Policy.

If you have any questions, please feel free to contact us at <u>Virtual@bgccc.com</u> and someone will be back in touch. Thank you for signing up your child for the Virtual Clubhouse! We are excited to see him/her soon!

Parent/Guardian Permission

Parent/Guardian's Signature\_

I,, paren	t/guardian of,
Print parent/guardian name	Print member's name
give permission for him/her to participate in d Collier County.	istance-based online Club experiences at Boys & Girls Club of
Parent/Guardian's Email Address	

Date



# 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 compensation or obtain any other remedy for any personal injury or property damage however caused arising out of the named minor's participation in Boys & Girls Club of Collier County 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 Club of Collier County activities comes with inherent risks. I have full knowledge and understanding of the inherent risks associated with Boys & Girls Club of Collier County 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 Boys & Girls Club of Collier County participation and that said list in no way limits the operation of this Agreement.

## Coronavirus / COVID-19 Warning & Disclaimer

Initial

Initial

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** Boys & Girls Club of Collier County programs or accessing Boys & Girls Club of Collier County facilities could increase the risk of contracting COVID-19. Boys & Girls Club of Collier County in no way warrants that COVID-19 infection will not occur through participation in Boys & Girls Club of Collier County facilities.

## Waiver, Release, Indemnification & Covenant Not to Sue

In consideration of \_\_\_\_\_\_\_\_\_'s participation in Boys & Girls Club of Collier County, 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 Boys & Girls Club of Collier County, 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 Boys & Girls Club of Collier County on account of past or future personal injury, property damage, death or accident of any kind, arising out of or in any way related to the past or future use of Boys & Girls Club of Collier County facilities/equipment or participation in Boys & Girls Club of Collier County facilities/equipment or unsupervised, however the injury or damage occurs, including, but not limited to the negligence of Releasees.



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

In consideration of the named minor's participation in Boys & Girls Club of Collier County, 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 past or future Boys & Girls Club of Collier County 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 Boys & Girls Club of Collier County 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 past or future loss or damage, including personal injury, property damage, or death, the named minor sustains while participating in Boys & Girls Club of Collier County 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 the named minor is in good health and has no conditions or impairments which would preclude his/her safe participation in Boys & Girls Club of Collier County.

I further certify that my date 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.

Parent/Guardian Name (Print Clearly)	Parent/Guardian Signature
Childs Name (Print Clearly)	Date
FOR OFFICE USE ONLY	
MTS Updated: Member Card Crea	ted : Rosters Updated:
This application was reviewed for completion by:	
Review Date:	