



Member Name: _____

2018-2019 MEMBERSHIP APPLICATION

MAIN OFFICE: 56 Mont Vernon St, Milford NH 03055 – (603) 672-1002 – www.svbgc.org

CONFIDENTIALITY: Any confidential information requested is for our records and for the funding our Organization receives. The answers you provide will be kept completely confidential. Your cooperation in providing this information is both appreciated and necessary. Required fields are denoted with an asterisk (*).

FINANCIALLY RESPONSIBLE /HEAD OF HOUSEHOLD INFORMATION:

*First Name: _____ *Last Name: _____ Relationship: _____

* St. Address: _____ City _____ State _____ Zip Code: _____

Work #: (____) ____ - _____ Cell #: (____) ____ - _____ Home #: (____) ____ - _____

*E-Mail Address: _____ Employer: _____

*Currently in the Military (circle) Y or N

If yes, Branch: _____ and do you live on a Military Base: (circle) Y or N

*ANNUAL HOUSEHOLD INCOME (circle one)

\$9,999 or Less \$10,000 - \$14,999 \$15,000 - \$19,999 \$20,999 - \$29,999 \$30,000 - \$39,999 \$40,000 - \$49,999

\$50,000 – \$74,999 \$75,000 - \$99,999 \$100,000 or More

How did you hear about us? _____

Will you be enrolling for the Milford Unit or the Greenfield Unit? _____

ADDITIONAL PARENT/GUARDIAN or EMERGENCY CONTACT INFORMATION:

1.
*First Name: _____ *Last Name: _____

*Relationship to member: _____

*Work #: (____) ____ - _____ *Cell #: (____) ____ - _____ Home #: (____) ____ - _____

E-Mail Address: _____ Employer: _____

*Currently in the Military (circle) Y or N

If yes, Branch: _____ and do you live on a Military Base: (circle) Y or N

2.
*First Name: _____ *Last Name: _____

*Relationship to member: _____

*Work #: (____) ____ - _____ *Cell #: (____) ____ - _____ Home #: (____) ____ - _____

E-Mail Address: _____ Employer: _____

*Currently in the Military (circle) Y or N

If yes, Branch: _____ and do you live on a Military Base: (circle) Y or N



MEMBER INFORMATION:

* Member First Name _____ MI _____

*Member Last Name _____ *DOB _____

*Grade: _____ *School: _____

* Mailing Address: _____ City _____ State _____

Zip Code: _____ * Gender: _____

* Ethnicity (circle one) White African-American Hispanic Asian Multi-Racial Other _____

* Do you receive free or reduced lunch? (Please circle one) Yes or No

***Family Setting**

Single Parent Home

Two Parent Home

Other _____

***Member Lives With:**
(Please Circle all that apply)

Mom	Dad
Step Mom	Step Dad
Grandparent	Foster Parent
Other:	

***Total Number in Household**

***Number in Household under the age 18** _____

***EMERGENCY INFORMATION:**

Please complete entire section

Any Special Needs/Health Issues?(if yes, please describe):

Any Medications that need to be taken at the Club (if yes, please describe):

Allergies (if yes, please describe):



Hospital Preferred: _____ **Primary Care Physician:** _____

MEMBERSHIP EXPECTATIONS:

The clubhouse is a community. Each member is responsible for how they behave in this community. There are several things that you can do to become a positive force in our clubhouse. They are:

- Respect everything and everyone.
- Physical force and or bullying will not be tolerated. Get help from an adult or walk away.
- Please respect everyone else's belongings. This includes locker space, back packs and much more.
- The adult leaders in the club are responsible for you. Showing disrespect, being rude, or striking a staff person is not acceptable.
- Swearing is not an acceptable way for speaking to others and it will not be tolerated.

When you break a rule several things may happen. You will be spoken to, you may be asked to sit out, and or your parents may be called (usually a third offense). Suspension guidelines are as follows; First suspension is one day off, second suspension three days off, and third suspension is five days off. After the third suspension it is up to the Director of Operations and parent to decide if re-entry into the clubhouse is appropriate. The following actions will result in immediate suspension: disrespect of a staff person, using physical force, vandalism, and endangering someone with inappropriate contact. These are the basic rules for our club. At times we will adjust, add, or change certain things to make our club a happy one.

FINANCIAL POLICIES *ALL RATES SUBJECT TO CHANGE*

- A non-refundable membership fee of \$35.00 is due annually for each child upon submission of membership application. Membership runs September 1st through August 31st. Replacement membership card fee is \$5.
- All tuition and program fees are payable in advance. Refer to individual program registration forms for details. Non-payment of fees may result in suspension of program participation/childcare privileges.
- If qualified for financial assistance, responsible party/guardian is responsible for completing all paperwork necessary for assistance and for the balance of fees for the days that child/children attends.
- Returned Checks or Declined Credit Cards: a \$25 fee will be applied to your account if your payment does not clear.
- Late Pick Up Fee: Any children picked up after stated program end time will be assessed a \$5 late fee after the first five-minute grace period. An additional \$1 per minute late fee will be charged until member has been picked up. For example, a child picked up at 6:50 from the afterschool program would be assessed a \$15 late fee per child (\$0 for 1st 5 minutes, \$5 for the next 5 minutes and \$1 a minute for each additional minute).
- All late fees are assessed per child.
- Late fees are due when child is picked up.

**WAIVER AND RELEASE OF LIABILITY, AND AUTHORIZATION FOR MINORS:
(IMPORTANT – READ BEFORE SIGNING)**

Parent/Guardian:

I, the parent/guardian of the minor child listed on this application, for ourselves, our heirs, executors and administrators, hereby release, waive, acquit and forever discharge The Boys & Girls Club of Souhegan Valley and Boys & Girls Club of America, their representatives, successors, insurers, assigns or any other person or entity associated with any of the above organizations such as staff, directors, or volunteers, from all liability, claims, demands, or causes of action for any and all loss, damage, injury or death of any claim of damages resulting from use of facilities owned or controlled by the above organizations, or participation in activities of said organizations either at or away from the club.

MEDICAL TREATMENT:

I give permission to The Boys & Girls Club of Souhegan Valley to seek emergency medical treatment for my minor child if I cannot be reached. I will be responsible for any/all costs of medical attention and treatment.

SURVEYS AND QUESTIONNAIRES:

I, the parent/guardian of the minor listed on this application give permission for The Boys & Girls Club of Souhegan Valley, to survey my child about his/her club experience or behaviors, skills and attitudes using Boys & Girls Clubs of America's Youth Development Outcome Measurement Tool Kit surveys or other survey instruments.

TECHNOLOGY:



As a member of The Boys & Girls Club of Souhegan Valley, your child will have access to the Internet. While precautions are taken, it is possible that your child may access inappropriate sites. The Boys & Girls Club will have rules and consequences at the Club for such behavior; however, we will not be responsible for the consequences of such access.

MEDICAL:

I assume full responsibility for the member's health being such that the activities will in no way aggravate any condition present. If in doubt, medical advice will be sought and followed. I agree that The Boys & Girls Club of Souhegan Valley will be notified in advance of any changes in the member's health status that may affect the member's needs during club activities. I declare the statements on this form to be true.

MISCELLANEOUS:

I understand that The Boys & Girls Club of Souhegan Valley is not responsible for lost or stolen items.

I, Parent or Legal Guardian, give/grant The Boys & Girls Club of Souhegan Valley permission to use any films, photographs, audio or videos, and internet uses taken for the purpose of informing the public about The Boys & Girls Club of Souhegan Valley, or any media source reporting on behalf of club activities. I further grant them the right to exhibit, distribute, sell or otherwise dispose of these materials.

I also understand that not every Club program is licensed as a day care center (RSA 170-E: 4) The Boys & Girls Club offers two state licensed programs, Jacques After School and Kindergarten, which are available to youth in Kindergarten and 1st grade. All other programs offered by the Boys & Girls Club of Souhegan Valley are licensed exempt programs.

As a member of the Boys & Girls Club of Souhegan Valley, your child is expected to respect staff, guests, visitors, and property. If youth members believe anything is unsafe, they should immediately advise a counselor, coach, instructor, supervisor, or other event organizer of such condition(s) and refuse to participate. Members agree to the Club's zero tolerance policy with respect to: drugs, alcohol, tobacco, weapons, and unreasonable behavior towards members, staff, and guests, including but not limited to sexual harassment or misconduct, abuse of internet access, destruction or theft of personal or Club property, discrimination towards others based on age, gender, religion, race, color, sexual orientation, disability, group, or association.

Member/Parent/Guardian Acknowledgement:

As the individual responsible for payments, I have read, understand and agree to abide by all payment policies set forth by the Boys & Girls Club of Souhegan Valley. I understand that I am responsible for all fees incurred for the days that my child/children attend. If qualified for financial assistance, I understand that I am responsible for completing all paperwork necessary for assistance and for the balance of fees for the days that my child attends

I understand and agree that members have an obligation to each other and the Club to *attend to safety* by looking out for others both physically and emotionally. Members are obliged to *be respectful and responsible* and will take responsibility for the care and maintenance of the building and the equipment within. I agree to *speak the truth* and be honest in terms of perception, feedback, and opinions.

By signing this agreement, I understand and agree that *my/my child's membership is a privilege* based on acceptable behavior and that a violation of this agreement, as well as the policies and procedures set forth in the Club policies manual, will result in disciplinary action, including at the sole discretion of the staff, loss of membership privileges. I further understand that in all cases regarding illegal drugs, alcohol, weapons or violent behavior, the local Police Department will be notified and both the victim and offender's guardians shall be notified by the Police Department.

I have read and understand the expectations outlined on this form and in the policies and procedures manual. I understand that by signing this document I am entitled to the privileges that go with membership.
Failure to meet the above mentioned expectations could result in forfeiture of membership.

THANK YOU!

PLEASE BE SURE TO SIGN BELOW YOUR CHILDS MEMBERSHIP WILL NOT BE ACTIVE UNTIL SIGNED.

* Financially Responsible Party/ Parent or Guardian Signature: _____ Date: ___/___/20___

*Member Signature (if 18 or older): _____ Date: ___/___/20___

OFFICE USE ONLY

MEMBERSHIP #: _____ MEMBERSHIP DATE: ___/___/20___ EXPIRATION DATE: ___/___/20___ ENTERED BY: _____