

Junior Club Program Registration Form

Please print clearly using ink

1144 NE Cedar Street, Roseburg, OR Phone: (541) 440-9505 Fax: (541) 440-9661

> E-mail: contactus@bgcuv.org Website: www.bgcuv.org

Family Information					
Parent/Guardian (child lives with)					
Mailing Address		ı	City	Zip	
E-Mail Address					
Cell Phone		Home Phone			
Employer	Position		Work Phone		
Other Parent/Guardian					
Address (if different)		City	Zip		
Cell Phone Hon			ome Phone		
Employer	Position		Work Phone		
Living with: □ Both parents □ Father & Step-Mother □ Mother & Step-Father □ Father Only □ Other					
Is either parent in the Military? Branch Status: Active Guard Reserve					
Member Information					
Child's First Name Middle Name Last Name					
Birth date		Gender ☐ Male ☐ Female			
School		Grade			
Ethnic Information: Check all that apply ☐ Hispanic ☐ Caucasian/White ☐ Native Hawaiian/Pacific Islander ☐ Asian ☐ African American ☐ Native American ☐ Other:					
Insurance Information					
Children must have health insurance as a pre-requisite for membership. If your child is not covered by health insurance please ask membership services for information on enrolling in the Oregon Health Plan.					
Insurance Company Name					
Insurance Policy Number		Insurance Policy Group Number			

Confidential Information This information will be kept in strict confidence and is important because it helps us to identify members who qualify for services including scholarships, free eye care and free dental care. It also makes the Boys & Girls Club eligible to receive federal grant funding. Family Income: □ \$0 - \$28,000 □ \$36,001 - \$40,000 □ \$46,401 - \$49,600 □ \$28,001 - \$32,000 □ \$40,001 - \$43,200 □ \$49, 601 - \$52,800 □ \$32,001 - \$36,000 □ \$43,201 - \$46,400 □ Over \$52,800 Number of people in your household: Does your family qualify for free/reduced fee school lunch? ☐ Yes □ No ☐ Free School Lunch ☐ Reduced Fee School Lunch Medical Information Does your child have any medical problems or allergies? □ No If yes, please explain: Please list any medications your child is taking: Note: The staff of the Boys & Girls Club cannot administer medication. All medication must be kept in the administrative offices. Please ask membership services for the Club's full medication policy. Does your child have special needs? ☐ Yes □ No If yes, please ask membership services for the Club's information sheet on serving members with special needs. **Emergency Contacts** In case of emergency, the Club will make every effort to reach the parents/guardians listed. However, in case we are unable to reach a parent/guardian, please list at least two other local emergency contacts. (1) Emergency Contact Person: Cell Phone: Relationship to child: Home Phone: (2) Emergency Contact Person: Cell Phone: Relationship to child: Home Phone:

Parent/Guardian Agreement

As a partner in your child's positive development, the Boys & Girls Club of the Umpqua Valley is committed to providing the best possible after-school program for your child. The following are expectations for parents/guardians of members of the Club.

Please read and understand each statement:

The Boys & Girls Club is a youth development program; not a child care facility. The program design requires members to be self-directed and responsible for choosing activities throughout the day from the schedule provided. Our staff helps guide members through problem-solving and decision making. If you believe your child would be better suited to a child care environment, we are happy to provide information on child care options in the community.

Be sure that your child has his/her membership card every day. Scanning in and out of the Club each day your child attends is **required**. The member's participation in most Club activities is also dependent on having their card with them as they move from area to area. If your child comes without a membership card, they will have to manually sign in. Replacement membership cards can be purchased in the office for \$2.00 each. Please help your child remember to bring their card every day!

The Club operates with a "Safe Passages" policy. For members under 6th grade, a parent, guardian, or other adult must come to the Greeter's desk to pick up his/her child. Members in 6th grade and up may leave the Club unescorted with written permission from a parent/guardian and a signed release of liability. No member will be allowed to return to the Club once they leave the premises for the day. It is the parent's responsibility to discuss the Safe Passages Policy with his/her child and ensure that he/she complies.

I understand that my child must attend a full day of school in order to attend the after-school program.

I understand that I am expected to pick up my child on time. The Club closes at 6:30pm during the school year and 5:30pm during the summer, winter and spring breaks. If your child is picked up late, the Greeter will issue a warning notice. If your child is picked up late a second time, your child's membership may be suspended and a \$50.00 late pick up fee will be assessed in order to reinstate the membership.

If my child is sick or injured or if he/she is suspended due to a discipline issue, I am required to pick up my child within 1 hour of notification by the Club.

I understand that any violation of Club rules by my child will result in disciplinary action as laid out in the member's Code of Conduct. I accept that the Club has the right to take the disciplinary action necessary.

I understand that my child's account of an event may differ from that of another member and/or staff member. In these situations, the staff does their best to determine the truth and to administer discipline fairly. By allowing my child to come to the Club I understand that I must respect and support Club Director's decisions regarding incidents that occur.

Parent/Guardian Agreement continued

Parents, guardians or family members who exhibit behavior or language that is offensive and/or inappropriate <u>or</u> engage in physical/verbal abuse or threat of harm to any staff, volunteer or member will be subject to removal from the facility.

I waive any claims against the board, staff or volunteers except claims arising from gross negligence or willful acts of the board or its agents that may arise from participation in Club activities.

Parent/Guardian Permission

Office Use Only:

□ Renewing Member

BGCUV # _____ Expires ____/____

□ New Member

Permission will be required for my child to be transported to any off-site activities accompanied by leadership staff. I understand that reasonable measures will be taken to safeguard the health and safety of all participants.

I will encourage my child's positive participation in Club programs and will adhere to all Club policies. I understand that failure to abide by these rules could result in suspension of my child's membership.

I give permission for the Club to use photographs and/or videos in which my child appears for publicity or programming purposes. \square Yes \square No Parent/Guardian Signature ______ Date _____ Payment Information: \$ 25 Club Membership Fee (one-time, non-refundable) \$ 150 1st month Junior Club Program Fee (\$) Minus Scholarship if applicable* *Scholarship requests must be accompanied by a free or reduced fee \$_____ Total lunch eligibility letter from the school district at the time of registration. I agree to pay the monthly program fee of \$150 (or scholarship amount if I qualify) for my child to participate in the Junior Club Program. Payments are due by the first day of each ***Payments not made by the first business day of the month will incur a \$10 late fee; and non-payment by the 5th of the month or a second late payment may result in the loss of your child's space in the program. For your convenience, you may put a credit card on file for automatic deductions. Parent/Guardian Signature ______ Date _____

□ Cash □ Credit □ Check #_____

Rcpt. #_____ Initials___ Date_____

Orientation requested? _____