2019-2020 MEMBERSHIP ENROLLMENT FORM

BOYS & GIRLS CLUBS OF HARFORD & CECIL COUNTIES

www.bgcharfordcecil.org

BOYS & GIRLS CLUBS
OF HARFORD & CECIL COUNTIES

FOR STAFF USE ONLY

Receipt Number _____
Enrollment Date: _____
Child's tracking number: _____

Cash____ Money Order _____ Check_____ BGS_____

Renewal? Yes / no

Any information requested on this form is used for recording purposes or required for funding.
The answers you provide on this membership form will be kept CONFIDENTIAL.

YOUTH Information *(Please Print)*

** denotes required information*

First Name*	**Middle Name**	**Last Name***
Nickname	**Birth date*:**	**Male _____ Female _____**
Ethnicity: ☐ African American ☐ Native American ☐ Caucasian ☐ Hispanic /Latino ☐ Asian ☐ Multiracial ☐ Other	**Home Address:** **Home Phone:**	**School Enrollment Information*** **School:** _____ **Grade:** _____ **Shirt Size:** **YS YM YL AS AM AL AXL**

Check All that apply*: TANF____ Food Stamps____ General Assistance_____ SSDI_____ SSI_____ Veterans Compensation _____

School Lunch (Free/Reduced)_____ Medicaid _____ Can Swim_____ Single Parent Home _____

PARENT Information *(Please Print)*

** denotes required information*

First Name*	**Middle Name**		**Last Name***
Gender (circle one) **Male Female**	**Annual Family Income *** **Less then $12,000 _____** **$12,000 to $17,000 _____** **$17,000 to $25,000 _____** **$26,000 to $ 35,000_____** **$ 36,000 to$60,000 _____** **$61,000 to $80,000 _____** **$81,000 and over _____**	**Family Size:**	**Home Address*:**
***Telephone #** **Home Mobile Work**		***E-mail Address:**	
Employer:		**Job Title:**	
Military Branch:	**Status:**	**Start Date:**	**End Date:**
Spouse - Parents/Guardian ***First Name:**	***Last Name:**	**Gender: Male____ Female____**	
***Home Address:**		***Mobile Phone:**	**E-mail Address:**
Employer:		**Job Title:**	
Military Branch:	**Status:**	**Start Date:**	**End Date:**

YOUTH Medical Information:		
Insurance Company:	**Insurance Policy/Group Number:**	**Health Problems/Allergies:**
Medications*:	**Disabilities/Psychological Conditions*:**	
Physician:	**Physician Phone:**	**Hospital:** / **Hospital Phone:**

Pick Up Information: (Two people authorized to pick up member-OTHER THAN PARENT)			
1. First Name	**Last Name**	**Phone : Home**	**Work**
Emergency Contact____ Primary Emergency Contact ____ Lives with member____			
2. First Name	**Last Name**	**Phone: Home**	**Work**
Emergency Contact____ Primary Emergency Contact ____ Lives with member____			

HOW DID YOU HEAR ABOUT US? (circle one)

School Patch.com Aegis Baltimore Child Club Member
Club Parent Dagger.com

I have read the completed application, understand the rules of the Boys & Girls Clubs of Harford & Cecil Counties and request that my son/daughter/ward be admitted into membership.

I have explained the rules to my son/daughter/ward and agree that the Boys & Girls Clubs will not be responsible for any accident to the boy/girl while on the Boys & Girls Clubs premises or while engaged in any of its activities away from the Boys & Girls Clubs.

I give my consent for photographs or videoing taping in which my son/daughter/ward may appear, to be used in any way the Boys & Girls Clubs may care to use them as long as it is consistent with the BGCHC mission.

_____ _____ _____

Parent or Guardian Signature **Member's Signature** **Date**

Note to Parent:
Member participation in Boys & Girls Clubs programs is likely to produce positive outcomes when members attend three times a week or more. Boys & Girls Clubs staff welcomes high levels of member participation in all programs as well as special programming.

Boys & Girls Clubs of Harford & Cecil Counties

Code of Conduct

Play Fairly and Be Honest
Be Respectful of Boys & Girls Club Staff
Say Only Good Things About Others
Resolve Disagreements in a Positive Way
Be Respectful Of Other Members and Their Property
Take Care of Your Boys & Girls Club Facility and Equipment
Avoid Use of Improper Language
Remove Hats Before Entering Building
Applaud The Efforts of Others
Run Outside Only
Participate Only In Program Areas Open To Your Age Group
Listen During Assemblies
Dress Appropriately At All Times
Smoking, Drugs, Alcohol and Other Drugs and Weapons Are Strictly Prohibited
Stealing will not be Tolerated!

Please read the following and sign where indicated:

I understand and agree that my child (or ward) must be picked up by closing time or a fee will be charged which must be paid before my child (or ward) can return to the Club.

_____ I understand and agree that BGCHC has an open door policy and cannot be responsible for my child (or ward) leaving the Club without permission. I understand that all members are free to come and go from the Club at their leisure.

I understand and agree that BGCHC does not refund membership fees and that my child (or ward) must obey all rules (Code of Conduct). I further understand that behavioral problems that cannot be solved can result in my child (or ward) being suspended from BGCHC without monetary refund.

_____ It is expressly understood and agreed that BGCHC shall not be responsible or legally liable for any losses of personal property, for any bodily injuries, or the results thereof, incurred and suffered by the applicant on any property of the BGCHC or in connection with any activities of any of its Units, or while engaged in any of the BGCHC's activities away from the Club.

I give permission for _____ (Name of School) to release a copy of my child, _____, report card for the entire school year to the Boys & Girls Clubs of Harford & Cecil Counties. I understand the information obtained from report cards will be confidential and used to assess the progress of my child.

Internet Usage Agreement: The opportunity to use Club's computers is based upon clear guidelines and agreements: (1) always be respectful of others, (2) never give out personal information over the computer, (3) always remember you are responsible for what you do online, (4) always follow the computer lab supervisor's instructions, (5) never agree to meet in person with anyone you meet online and (6) never visit 'off-limits' web sites. Failure to uphold these agreements will result in revocation of the member's online privileges.

Signature of Parent/Guardian _____ Date _____

Signature of Child _____ Date _____