



**BOYS & GIRLS CLUB  
OF MORGAN COUNTY**

**2024 Membership Form**  
Jan. 1, 2024 - December 31, 2024

<b>SITE:</b>	New _____
To be completed by BGC staff	
Paid Date:	Renew _____
Pymt Type:	
Staff Name:	

**Member Information (Please Print Clearly)**

Member's First Name	Member's Middle Name	Member's Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Phone Number	Home Address	
<input type="text"/>	<input type="text"/>	
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
		County
		<input type="text"/>

**Demographic Information (used for grant & program purposes)**

Gender:    M    F     African American    Asian    Caucasian    Hispanic    Multi-Racial    Native American    Other    Pacific Islander

Birthdate:       Age:       School:       Grade:

Sisters:       Brothers:       Total Number In Household:

Lives With: (Please circle one)

<input type="checkbox"/> 2 Parents	<input type="checkbox"/> Father	<input type="checkbox"/> Mother	<input type="checkbox"/> Aunt/Uncle
<input type="checkbox"/> Grandparents	<input type="checkbox"/> Foster Parents	<input type="checkbox"/> Guardian	<input type="checkbox"/> Other _____

**Confidential:** The following information is completely confidential and is required for the club to obtain funding as a non-profit agency.

**Annual Family Income (Please check one)**

<input type="checkbox"/> > \$5,000	<input type="checkbox"/> > \$10,000	<input type="checkbox"/> > \$15,000	<input type="checkbox"/> > \$20,000
<input type="checkbox"/> > \$25,000	<input type="checkbox"/> > \$30,000	<input type="checkbox"/> > \$35,000	<input type="checkbox"/> > \$40,000
<input type="checkbox"/> > \$45,000	<input type="checkbox"/> > \$50,000	<input type="checkbox"/> + \$50,000	

Please select from the following options below for your child/family (**MUST** select at least one. Select "no aid" if no aid is received)

No Aid Received \_\_\_    SSDI \_\_\_    SSI \_\_\_    Bridges \_\_\_    Wrap Around \_\_\_    Day Care Voucher \_\_\_    TANF \_\_\_

Free/Reduced School Lunch \_\_\_    Military Family \_\_\_    Vets. Compensation \_\_\_    Food Stamps \_\_\_    IEP \_\_\_

**Primary Guardian Contact Information**

Parent/Guardian First & Last Name	Primary Phone	E-mail Address
<input type="text"/>	<input type="text"/>	<input type="text"/>
Relation to Member	Work Phone	Place of Employment
<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Address	City	State      Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>

**Other Guardian Contact Information (spouses, step-parents, non-custodial parents, grandparents)**

1. Parent/Guardian First & Last Name	Primary Phone	E-mail Address
<input type="text"/>	<input type="text"/>	<input type="text"/>
Relation to Member	Work Phone	Place of Employment
<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Address	City	State      Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/>

**Other Guardian Contact Information *cont.***

2. First &amp; Last Name

Primary Phone

E-mail Address

Relation to Member

Work Phone

Place of Employment

Home Address

City

State &amp; Zip

**Medical Information**

Health Problems/Allergies/Disabilities

Medications

Physician

Physician's Phone

\*\*\*Behavior issues or other medical information that is helpful for the Club Staff to know \*Child Success Plan available

**Additional Adults Allowed to Pick Up Member *(relatives, friends, etc.)***

Name	Primary Phone	Relationship to Member
1		
2		
3		

**\*\*\*\*ID REQUIRED UPON PICK UP\*\*\* \*\*\*\*ALL CHANGES MUST BE MADE IN PERSON\*\*\*\***Persons NOT authorized to pick up Member *(copy of a court order is required for birth parents)***Member Pick Up Authorization Code (4-digit confidential code):** \_\_\_\_\_**Self Sign-Out Permission****For children to leave the Club without an authorized adult**

Please note that if members are granted permission to sign themselves out, the Club is not legally responsible for the safety and wellbeing of the Member after they have signed themselves out.

\_\_\_\_\_ My member DOES NOT HAVE PERMISSION to sign himself/herself out of the Boys & Girls Club.

\_\_\_\_\_ My member HAS PERMISSION to sign himself/herself out and leave the Club without an authorized adult present.

\_\_\_\_\_ My member HAS PERMISSION to sign himself/herself out and leave the Club without an authorized adult present only at the following times: \_\_\_\_\_ Only on (Circle): M T W TH F \_\_\_\_\_ Only at 7:00 PM \_\_\_\_\_ Other: \_\_\_\_\_

**Waiver of Liability/Agreements**

- I have completed the application and the application is accurate. I reviewed the parent/member handbook and I acknowledge and agree to the rules and policies of the Boys & Girls Clubs of Morgan County including the discipline policy and request that my child be admitted into membership. My Child and I accept full responsibilities for his/her actions and behaviors at the Boys & Girls Club. I give the Boys & Girls Club permission to use my child's picture in newspaper articles, newsletters, and other publicity materials. I give my child permission to participate in pre and post tests or other measurement tools used to determine program recommendations, outcome measurements and program effectiveness. I give the Boys and Girls Club permission to copy my child's report card. The Boys & Girls Clubs of Morgan County agrees that in the performance of its services, it will not, on the grounds of race, color, sex, age, sexual preference, gender identity, disability or national origin, exclude any person from participation in, deny any person the benefits of, or otherwise subject any person to discrimination under any activity. I understand that the Club is not responsible for any lost or stolen items.
- I hereby release the Boys & Girls Clubs of Morgan County, their Board of Directors, agents, employees, volunteers, and insurers from any present or future personal injury or damage to property caused by having any relation to this activity. I understand that this release binds my heirs, executors, and administrators. I have read this release and understand all of its terms. I sign it voluntarily and with full knowledge of its significance. In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by the Boys & Girls Club to hospitalize, to secure proper treatment for, and to order injections, anesthesia, or surgery for my child as named above.
- I understand that in order to receive my member, I, or others on my pick up list, will be asked to provide a picture I.D. I am responsible for ensuring adults that pick up my child understand this policy. I understand any changes to my child's pick up list must be done in person, not over the phone.
- Membership fees are nonrefundable.

Parent/Guardian Signature

Date

Initial here if you have ANY EXCEPTIONS to the above conditions and explain below.

Explanation:



## Child Success Plan

This form will allow for us to receive the appropriate information to better understand your child and to properly interact with your child *to the best of our ability*. To do so, we need to be able to ensure that ALL youth are physically & emotionally in a safe environment with appropriate supervision. If the actions and behaviors of your child require physical intervention, we will not be able to safely serve them.

We hope to support your child, but as a parent/guardian, we ask that you understand that if your child requires so many resources that it jeopardizes the safety and well-being of the majority that a parent meeting will be required to discuss member attendance and participation at the Club. Safety for all is our #1 priority.

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**Child's Name:** \_\_\_\_\_

**Age:** \_\_\_\_\_ **Grade** \_\_\_\_\_ **School** \_\_\_\_\_ **Teacher** \_\_\_\_\_

Describe your child's ability (or lack of) to work with others:

What are your child's strengths?

How does your child respond to structured activities?

How does your child respond to change?

When your child exhibits inappropriate behaviors at home, how do you manage it?

Does your child exhibit inappropriate behavior at school? If so, how does the school manage it?



What **triggers** cause negative behavior in your child?

What are appropriate consequences for your child?

What are rewards/motivators for your child?

What does your child enjoy doing in his or her free time?

Additional information that we may need to know to better work with your child:

I understand that my child is required to actively participate in Club programs as well as behave in a positive manner. I understand these services are a privilege and can be taken away if my child demonstrates disrespectful or negative behavior at the Club, as outlined by our behavior management protocol. **By signing, you state that the information provided is truthful to the best of your knowledge and that you understand the role of the Boys & Girls Club and staff.**

\_\_\_\_\_ **YES**, I grant permission for BGCMC staff to communicate with any school staff/faculty and any other adults I approve to discuss my child.

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The BGCMC has my permission to discuss my child with these additional people:

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\_\_\_\_\_ Name

\_\_\_\_\_ Signature

\_\_\_\_\_ Date

**Boys and Girls Club of Morgan County**  
**Parent & Guardian Acknowledgments and Agreements for Membership**

- Upon entering the Club, I commit to ensuring that each Club Member reaches his or her full potential as a caring, productive, responsible citizen in complete safety.
- The Club's ability to operate is directly related to the giving of individuals in our community and I will give in some way to support the Club.
- The Boys and Girls Club is a membership organization for youth. In joining the Club members will strive to develop their best skills and help other members succeed at this goal to achieve a successful future filled with hope and opportunity for all.
- Medications, prescription and over the counter, that my child may need while at the club must be given to the professional staff in its original container with administering instructions signed by a practicing physician.
- Parents/guardians will have my child signed-out from the Club every day by a person who is authorized on the membership form.
- Parents/guardians will update all contact information on the membership form as my contact information changes.
- Urgent changes to my child's authorized pick-up list must be confirmed by a custodial parent or guardian.
- My child will come to the club having eaten a regular meal and I will provide a lunch for my child on days when he or she is at the Club during the lunch hour (12:00 PM to 1:00 PM) .
- My child's belongings are his or her sole responsibility when they are at the Club and the Club is not responsible for my child's articles that become misplaced or disappear.
- It is my responsibility to supply my child with sunscreen for their use. My child is responsible for applying his or her own sunscreen or asking a staff to assist with sunscreen application.
- If I wish to renew my child's membership, I will do so within the 60 days of the annual renewal period (Dec. 1 through Jan. 31).
- I understand, per the Club's Behavior Management Protocol that Club members benefit through positive participation and may lose privileges including suspension from the Club based on repeated behavioral transgressions.
- The Club is designed to serve youth ages 6 through 18 years who can actively and cooperatively participate with the membership and programs. Any exceptions will be made at the discretion of the directing staff and may be terminated at any time.
- The Club aims to be open most days of the school year but is closed some days for various reasons. It is my responsibility for knowing the Club's schedule.
- I am familiar with the late pick-up policy found in the parent handbook and will abide by club hours and pick-up my child before the club's closing time. The Club may take all means necessary to maintain this commitment including releasing my child to the police department and notify Children's Services if I am late to pick up my child (30 minutes after Closing time).
- The Club may use my child's image in photographs and video for public relation purposes. If I do not want my child's image used I will give my initial and explanation on the MEMBERSHIP FORM and the MEMBERSHIP AGREEMENT EXCEPTION FORM.

- I understand that phone calls into the Club during program hours prevent staff from giving their full attention to those who are in the Club. I will not call the Club between 4:00 and 6:30 PM unless it is an urgent matter pertaining to my child.
- Accidents and a variety of personal incidents may occur while at the Club. The staff will provide care and document these occurrences when my child is involved, communicating complete details of occurrence and response.
- I give permission for my child with Club staff, to walk to Pioneer Park and/or ride on Club vehicles going on routine trips to schools and other Club business.
- My child may view movies or television programs at the Club. These movies will have a "PG" rating.
- I understand that any verbal changes to my child's pick up list must be accompanied by the 4-digit security code (above) and that any long term changes must be made by a custodial parent or guardian on the membership form.
- Because of the time and resources that are donated and volunteered for club programming, I will support my child and the club by ensuring that my child attends and participates 100% in any special programs they are signed up for.

I agree: \_\_\_\_\_ Date \_\_\_\_\_

Printed name: \_\_\_\_\_

Any exceptions I have to the acknowledgment and agreements are and I wish to discuss these with the Unit Director :

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### **Our Promise to the Members**

The Boys and Girls Club of Morgan County, its staff, volunteers and general membership promise to:

1. Ensure that each member reaches his or her full potential as a productive, caring, responsible citizen in complete safety
2. Collaborate with members and their families on making the Boys and Girls Club the positive place for kids
3. Provide members with daily opportunities for building important skills and relationships
4. Offer a diverse and varied program
5. Emphasize member involvement and development
6. Provide for the safety of our members at all times