

For Office Use ONLY

Member #: _____
 Date: _____
 Received by: _____
 Unit: _____
 New/Renewal: _____



Membership Application

Please print and fill out application completely. BGC will NOT accept incomplete applications.

Child First Name: _____ M.: _____ Last: _____

Address: _____ Primary Phone: (____) _____

City: _____ State: _____ County: _____ Zip: _____

Date of Birth: _____ Age*: _____ *THE CLUB MAY REQUEST A COPY OF A MEMBER'S BIRTH CERTIFICATE TO VERIFY AGE*

Previous Club Membership: __Yes __No If applicable, previous Club location: _____

Gender:	Child's Ethnicity:	School Name:	School Grade:	School Lunch:
<input type="checkbox"/> Female <input type="checkbox"/> Male	<input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Multi-Racial <input type="checkbox"/> Caucasian <input type="checkbox"/> Pacific Islander <input type="checkbox"/> Other: _____	_____ _____	_____	<input type="checkbox"/> Free <input type="checkbox"/> Reduced <input type="checkbox"/> Paid in Full

Parent/Guardian Information: (Please Print)

Parent/Guardian Name: _____ Relationship to Child: _____

Primary Number: _____ Work Number: _____

Employment: _____ Email Address: _____

Parent/Guardian Name: _____ Relationship to Child: _____

Primary Number: _____ Work Number: _____

Employment: _____ Email Address: _____

Emergency Contact: Parent(s)/Guardian(s) will be contacted first.

_____	_____	_____	_____
Name	Phone	Additional Phone	Relationship
_____	_____	_____	_____
Name	Phone	Additional Phone	Relationship

Additional Individuals Authorized to Pick Up Member			
_____ Name	_____ Phone	_____ Additional Phone	_____ Relationship
_____ Name	_____ Phone	_____ Additional Phone	_____ Relationship
_____ Name	_____ Phone	_____ Additional Phone	_____ Relationship

Medical Information

Child's Physician:	Medications:
Office #:	
Allergies: <i>Include Food Allergies</i>	Additional Medical Information:

Household Information Information is collected for private and public funding and to measure program effectiveness.

Is this member from a single parent household? <input type="checkbox"/> Yes <input type="checkbox"/> No	Gender of the Head of Household <input type="checkbox"/> Female <input type="checkbox"/> Male	Total persons living in household? <hr/> Total under Age 18?	Active Military Family*? <input type="checkbox"/> Yes <input type="checkbox"/> No If you selected yes, what branch? <hr/> *Membership Fee is waived for Active Military Households.
Household Income (circle): ----under \$9,999 ----\$25,000-34,999 ----\$10,000-14,999 ----\$35,000-49,999 ----\$15,000-24,999 ----\$50,000 & over			
Member lives with? (circle all that apply) Mother Father Step Mother Step Father Aunt/Uncle Grandparents Foster Care Other _____			

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 Boys & Girls Clubs of North Central North Carolina, and Boys & Girls Clubs of America, their representatives, successors, insurers, assigns or any other person or entity associated with any of the above organizations such as Leaders, Directors or Volunteers, from all liability, claims, demands, or causes of action from any and all loss, damage, injury or death and any claim of damages resulting from use of facilities owned or controlled by the above organizations, or participation in activities under the supervision of said organizations either at or away from the Club.

Parent/Guardian Signature: _____ Date: _____

Membership will expire on December 31st, 2020
ALL INFORMATION WILL BE KEPT CONFIDENTIAL

Club Member Name: _____

Data Release/Policy Notification Form

DATA COLLECTION

I give my permission to Boys & Girls Clubs of North Central North Carolina to collect information via online or written surveys, questionnaires, interviews, and focus groups from the minor child listed on this application. Any and all information received will be kept strictly confidential. Data gathered through these means will be summarized in the aggregate and will exclude all references to any individual responses. The aggregated results of these analyses may be shared with Club Leaders, Boys & Girls Clubs of America (BGCA), funders, and other community stakeholders to evidence program effectiveness and/or Club impact on our members.

DATA SHARING

I understand that Boys & Girls Clubs of North Central North Carolina may share information about the minor child listed on this application with Boys & Girls Clubs 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 district, and other information collected by Boys & Girls Clubs of North Central North Carolina, including data collected via surveys or questionnaires. All information provided to BGCA will be kept confidential.

SAFE PASSAGE POLICY

The Club has a Safe Passage Policy, which allows Club members to attend at any time during operating hours unless otherwise posted.

Under this policy:

- Members must scan in and out each day;
- Members under the age of 13 must be retrieved from the Club by a parent, guardian or other authorized adult;
- Members age 13 and older may leave the club unescorted with written permission from a parent or guardian and a signed release of liability;
- Members age 13 and older may also escort other members of their household from the Club with written permission;
- No member, regardless of age, will be allowed to return to the Club once they leave the premises for the day; except for doctor appointments or if approved by the Unit Director/Site Coordinator.
- Members that leave unescorted without written permission will face disciplinary actions up to and including suspension and termination of membership.

BOYS & GIRLS CLUBS OF AMERICA PROGRAMS

I understand the priority the Club places on academic success, healthy lifestyles, and good character and citizenship and therefore support my child's participation in the Club's core programs such as: Power Hour, Street SMART, Triple Play, etc.

My child is also given permission to participate in SMART Moves at the Club. These programs address problems such as drug and alcohol use. The program uses a team approach involving Club staff, peer leaders, parents and community representatives. We understand the sensitive nature of the programming may not fit every family, however, please keep in mind that the curriculum is very age appropriate. The delivery of this program is very important to your child's development and to the funding of our Club, as it is directly tied to grant funding that supports overall program delivery.

SCHOOL RECORDS

I give my consent to Boys & Girls Clubs to obtain information from my child's school (ex. report card, grade point average, disciplinary records, and the number of days absent). This data is used for grant reporting to ensure continued funding for Club programming and for use in evaluating program effectiveness. This information will be confidentially secured for a minimum of five (5) years.

MEDIA PERMISSION

For valuable consideration I, the undersigned, hereby irrevocably consent to and authorize the unrestricted use by Boys & Girls Clubs of North Central North Carolina, affiliates and advertising agencies of my child's name, photographs, works of art and identity in various BGC website and collateral material, as well as miscellaneous print publications and other media outlets, and any personal information that I supply to the companies, in connection with advertising and promotion for the companies and/or their products in any media, form or material selected by the companies, without any right of prior review or further approval, whether such advertising and promotion is to the public, to the trade, or both, and in the corporate releases, newsletter and other communications of the companies; and I hereby waive, and release and discharge said companies and all agents, employees and officers of the companies, including their agencies, media producers and customers from, any claims, liabilities and demands, past, present or future, including any that I do not now know of or anticipate arising in the future, none of which would affect my execution of this release if known to me, and waive all rights with respect to such use of my name, photograph, identity, and personal information including but not limited to publicity, privacy, psychological injury and libel.

_____ I give permission to Boys & Girls Clubs of North Central North Carolina to use my child's name, photo, works of art, etc. as stated above in the "Media Permission" section.

_____ I DO NOT give permission to Boys & Girls Clubs of North Central North Carolina to use my child's name, photo, works of art, etc. as stated above in the "Media Permission" section.

COMPUTER AND INTERNET USE PERMISSION

All computer systems are property of Boys & Girls Clubs of North Central North Carolina. It is for authorized use only. Users have no explicit or implicit expectation of privacy. Any or all uses of a computer and all files on the computer may be intercepted, monitored, recorded, copied, audited, inspected and disclosed to authorized personnel, as well as authorized officials of other agencies. By using a computer, the user consents to the above mentioned. Unauthorized or improper use of a computer may result in administrative disciplinary action and civil and criminal penalties. By using a computer, you indicate your awareness of and consent to these terms and conditions of use. If you do not agree to the conditions stated in this warning log, do NOT allow your child to use a computer!

Child's Name (PRINT): _____

As a parent/guardian, I have read, discussed and explained the computer use policy with my child. I grant permission for the member named above to access the computers. I understand that if he/she fails to follow the computer use policy, computer and internet access may be withdrawn and I shall be informed of this and any further appropriate action will be taken.

I am aware that no personal information will be made public and that the Club will maintain strict confidentiality for personal information.

Parent / Guardian Signature

Club Member's Signature

Date: ____ / ____ / ____

PERMISSION FOR MEMBER TO LEAVE WITHOUT ADULT SIGN OUT:

All members under age 13 are required to be signed out by a parent/guardian or their designee. Members 13 and over will also be required to have an adult sign them out at the front desk unless the following permission is given:

I request that my son or daughter be permitted to leave Club premises without an adult, or to be released to siblings, friends or other relatives, at my child's discretion

Member's Name: _____

Parent/Guardian/Signature: _____