Member ID#	
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# **GREAT FUTURES START HERE.**



# 2018-2019 Membership Application

PLEASE <u>PRINT</u> NEATLY!!!!!!	☐ Past Member ☐ Male ☐ Female ☐ New Member	Date of Birth// month/day	
Member's Last Name:	First Name:	Age:	
Street Address:		_ Apartment:	
☐ Fitchburg ☐ Leominster	State: □ MA	Zip Code:	[
Home Phone: ()		)	First Name
Parent/guardian names (PLEASE PRI	NT):		
Occupation:	Employer :		
Occupation:	Employer :		
(Mother / Father)	EASE PRINT):		
(Be NEAT and ACCUR	ATE! If there is an emergency involving your child we		
,	*Check off any listed contacts with which this member cu	rrently lives.	
		rrently lives.	
,	*Check off any listed contacts with which this member cu	rrently lives.	
,	*Check off any listed contacts with which this member cu	rrently lives.	Cell / Pager
Name and Relationship	*Check off any listed contacts with which this member cu:  Address Home Photo  Address	rrently lives.	
Name and Relationship  Does your child have any known allerg	*Check off any listed contacts with which this member cu	or takes any medication,	Cell / Pager

\*\*Incomplete Membership Applications will NOT be accepted. Please make sure to complete the application to the best of your knowledge\*\*

and cooperate with all staff and personnel. I understand that his or her failure to do so may result in the cancellation of this membership with no refund of dues. Membership may also be cancelled if it is found that false or incomplete information has been provided or that emergency contact information is invalid. Membership may also be cancelled if

child's behavior and continued behavior and actions present a safety risk to other children.

How many years has this child been a Boys & Girls Club Does this child attend ongoing after school youth program	
If so, please list them:	
Do your kids use a computer at home? ☐ Yes ☐ No	Internet access at home? $\square$ Yes $\square$ No

The Boys & Girls Club of Fitchburg and Leominster receive federal HUD CDBG funding for our after-school and Teen Center services. Since your child is a participant in this program, we are asking your cooperation in completing the information below. Please be assured that this information will remain confidential and will be used only to meet the record keeping requirements of the Boys & Girls Club and the U.S. Department of Housing and Urban Development. I authorize the agency to release information to other appropriate agencies after prior discussion of such action with me. I have been advised of and understand the purpose and use of the information requested. A voluntary donation is requested but is not required in order to receive services.

Thanks for your cooperation!!

## 2018 INCOME LIMITS FOR HUD PROGRAMS

Fitchburg-Leominster (Effective 7/17/2018) Median Income <u>\$64,550</u>(family of four)

#### **Annual Household Income:**

Please <u>CIRCLE</u> the number of people in your household, including yourself- then <u>CIRCLE</u> your total household income for the past 12 months under the number of persons in your household.

<u> 1 Person</u>	<u> 2 Person</u>	<u> 3 Person</u>	<u> 4 Person</u>
Over \$45,200	Over \$51,650	Over \$58,100	Over \$64,550
Equal to or less than			
\$45,200	\$51,650	\$57,600	\$64,550
Equal to or less than			
\$28,250	\$32,300	\$36,350	\$40,350
Equal to or less than			
\$16,950	\$19,400	\$21,800	\$24,200

5 Person	<u> 6 Person</u>	7 Person	8 Person
Over \$69,750	Over \$74,900	Over \$80,050	Over \$85,250

| Equal to or less than |
|-----------------------|-----------------------|-----------------------|-----------------------|
| \$69,750              | \$74,900              | \$80,050              | \$85,250              |
| Equal to or less than |
| \$43,600              | \$46,850              | \$50,050              | \$53,300              |
| Equal to or less than |
| \$26,150              | \$28,100              | \$30,050              | \$31,950              |

	S	agna	ture:			
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Please Check the appropriate category below:	
Race:   White,   Black African/American,	☐ <u>Asian</u> , ☐ <u>American Indian/Alaskan Native</u> ,
□ Native Hawaiian/Other Pacific Islander,	☐ American Indian/Alaskan Native & White,
□ Black African American & White,	☐ <u>Asian &amp; White</u> ,
☐ American Indian/Alaskan Native & Black Africa	n American,   Other Multi-Racial,
<b>Ethnicity:</b> □Hispanic/Latino, □Not Hispanic/La	tino
<b>Female Head of Household?</b> □Yes □No	
☐ Lives with two parents ☐ Single Parent (Mother Property of the Control of the	er / Father)
☐ Foster parent ☐ Lives in group home/ prot	1
Does your family receive <b>any</b> form of general assisting (e.g. □ TANF, □ Food Stamps, □Section 8, □SSI, □DCF as	stance $\square$ Yes $\square$ No sistance, $\square$ MA Childcare voucher, $\square$ shelter, $\square$ homeless services)?
Does your child receive? □Free Lunch □Reduced	l Lunch □Neither
This program is not licensed by t	he Department of Early Education and Care
I hereby certify that the information contained on the knowledge, under penalty of law and verifiable by	<u>-</u>
Parent Signature	
	_ to the Membership Fund to provide financial assistance t Options: Cash, Check, Money Order, PayPal, Credit
***How did you hear about our After School pr  Walk-In  Newspaper  Facebook	rogram?  □ Flyer □ Friend / Relative
☐ 5K ☐ Science Festival ☐ Sch	ool

- 1. ALL MEMBERS ARE EXPECTED TO RESPECT CLUB RULES, CLUB STAFF, OTHER MEMEBERS AND CLUB PROPERTY AT ALL TIMES.
- 2. ALL MEMBERS MUST SHOW THEIR I.D. CARD TO THE PERSON AT THE FRONT DESK EVERYTIME THEY ENTER THE BUILDING AND EVERYTIME WHEN LEAVING AT THE END OF THE DAY WITH A PARENT OR GUARDIAN. NO ONE ELSE MAY USE YOUR CARD. IF YOU LOSE YOUR CARD, YOU MAY PURCHASE A NEW ONE FOR \$2.
- 3. NO MEMBER IS ALLOWED TO "HANG OUT" OUTSIDE THE CLUB WHETHER THE BUILDING IS OPEN OR CLOSED; ALL MEMBERS ARE TO BE OFF THE PROPERTY WITHIN 5 MINUTES OF THE CLUB CLOSING.
- 4. MEMBERS WHO CONSTANTLY LEAVE THE BUILDING WILL BE ASKED TO LEAVE FOR THE DAY OR EVENING; MEMBERS ARE REQUIRED TO SIGN IN ONCE THEY ENTER THE BUILDING. ONCE SIGNED OUT YOU ARE SIGNED OUT FOR THE DAY UNLESS APPROVED BY STAFF.
- 5. USE OR POSSESION OF TOBACCO, ALCOHOL OR DRUGS IS STRICTLY PROHIBITED. ANYONE CAUGHT BREAKING THIS RULE WILL BE SUSPENDED INDEFINITELY AND HIS/HER PARENTS WILL BE NOTIFIED.
- 6. BULLYING AND/OR TEASING WILL NOT BE TOLERATED AND CONSEQUENCES WILL BE STRICTLY ENFORCED.
- 7. MEMBERS MUST USE APPROPRIATE LANGUAGE AT ALL TIMES.
- 8. FIGHTING, PLAY FIGHTING, PUSHING, SHOVING, WRESTLING, SNOW BALL FIGHTS, ETC. ARE PROHIBITED.
- 9. WEAPONS OF ANY KIND, INCLUDING TOY WEAPONS ARE PROHIBITED.
- 10. FOOD AND DRINKS ARE ALLOWED IN DESIGNATED AREAS <u>ONLY</u>. PLEASE THROW AWAY TRASH IN TRASH CANS. THEY ARE LOCATED THROUGHOUT THE CLUB AND OUTSIDE THE BUILDING.
- 11. ALL NON-TEEN MEMBERS MUST LEAVE THE BUILDING BY 6:00 P.M. SOME MEMBERS WILL BE ABLE TO STAY LATER WITH PRIOR APPROVAL FROM BOTH STAFF AND PARENTS.
- 12. <u>2 WAYS, RADIOS, CELL PHONES, IPODS, AND ELECTRONICS ARE PROHIBITED.</u> (EXCLUDING TEENS) <u>IF WE SEE IT, WE WILL TAKE THEM FOR A DAY AND RETURN TO YOUR PARENT OR GUARDIAN WHEN YOU SIGN OUT.</u>
- 13. MEMBERS SHOULD NOT BRING VALUABLES TO THE CLUB, <u>AS THE CLUB IS NOT RESPONIBLE FOR LOST OR STOLEN ITEMS</u>. THE FRONT DESK PERSON WILL NOT HOLD YOUR VALUABLES BEHIND THE DESK.
- 14. CLUB PHONES ARE FOR BUSINESS AND EMERGENCIES ONLY. SEE STAFF FOR PERMISSION.
- 15. GUM IS NOT ALLOWED IN THE CLUB.
- 16. ANY MEMBERS RIDING A BICYCLE TO THE CLUB SHOULD LOCK IT IN THE BIKE RACK. FOR SAFETY REASONS, SKATEBORADS OR ROLLERBLADES ARE PROHIBITED.
- 17. ANY MEMBER WHO IS HAVING PROBLEMS WITH ANOTHER MEMBER OR MEMBERS SHOULD REPORT THE PROBLEM TO A STAFF MEMBER IMMEDIATELY, DO NOT TAKE THE PROBLEM INTO YOUR OWN HANDS.
- 18. IF YOU BECOME HURT OR ARE NOT FEELING WELL IN ANY WAY, SEE STAFF IMMEDIATELY.
- 19. <u>ALL MEMBERS SHOULD RESPECT THE CLUB PROPERTY and WILL PAY RESTITUTION FOR ALL DAMAGES.</u>
- 20. MEMBERS SHOULD WEAR APPROPRIATE CLOTHING AT ALL TIMES. THIS INCLUDES CLOTHING THAT IS IN GOOD TASTE, NON-REVEALING, NO NEGATIVE OR FOUL WORDING OR DESIGNS.
- 21. MEMBERS ARE NOT ALLOWED TO SELL OR TRADE POSSESSIONS ON CLUB PROPERTY.
- 22. MEMBERS MUST ATTEND SCHOOL DURING THE DAY TO ATTEND THE CLUB IN THE AFTERNOON.
- 23. <u>MEMBERS ARE NOT ALLOWED TO PLAY ALONE ON THE PROPERTY OR GROUNDS. MEMBERS MUST ALWAYS BE IN AN AREA WHERE STAFF IS PRESENT.</u>
- 24. 8-12 YEAR OLD MEMBERS SHOULD NOT ACCESS THE TEEN CENTER UNLESS WITH STAFF APPROVAL.
- 25. TEEN MEMBERS SHOULD NOT ACCESS 8-12 YEAR OLD PROGRAM/ACTIVITY SPACE WITHOUT STAFF APPROVAL.
- 26. MEMBERS NEED TO BE PICKED UP OR LEAVE ON TIME. 8-12 YR OLDS 6:00 PM, TEENS, 7:00 PM.IF NOT, LATE PICK UP FEES WILL APPLY. NO EXCEPTIONS
- 27. SAFETY FIRST, USE COMMON SENSE, HAVE FUN, AND KEEP THE BOYS & GIRLS CLUB "A POSITIVE PLACE FOR KIDS!".

ANY MEMBER FAILING TO COMPLY WITH THE RULES AND REGULATIONS MAY HAVE HIS/HER

MEMBERSHIP REVOKED WITH NO REFUND OF MEMBERSHIP FEES.

WE HAVE REVIEWED THESE RULES TOGETHER

PARENT/GUARDIAN SIGNATURE

DATE

MEMBER SIGNATURE

DATE

#### Parent Release

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 Fitchburg and Leominster, Gardner Club 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 staff, directors or volunteers, from all liability, claims, demands, or causes of action for 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 of said organizations either at or away from the Club.

#### Medical Treatment

I give permission to the Boys & Girls Club of Fitchburg and Leominster, 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.

#### **Data Collection**

I give my permission to the Boys & Girls Club of Fitchburg and Leominster, 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 staff, Boys & Girls Clubs of America (BGCA), funders, and other community stakeholders to evidence program effectiveness and/or Club impact on our members.

#### **School Information**

I give my permission to the Boys & Girls Club of Fitchburg and Leominster, along with the Fitchburg and Leominster School District to exchange information regarding the minor child listed on this application. The purpose of the exchange is to help both organizations do a better job of helping the student be successful in school, in the Boys & Girls Club and in life. This release is valid for one year and may be revoked at any time by contacting Gardner School District or the Boys & Girls Club in writing.

### **Data Sharing**

I understand that the Boys & Girls Club of Fitchburg and Leominster, 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 Club of Fitchburg and Leominster, including data collected via surveys or questionnaires. All information provided to BGCA will be kept confidential.

#### **Technology**

As a member of the Boys & Girls Club, your child will have access to the Internet. While precautions are being taken, it is possible who s/he 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.

☐ I give permission for my child's picture, moving pictures, or any other graphic depiction or likeness, to be used by the Boys & Girls Club and its activities. I also understand who the Club is not, nor does it claim to be, a licensed day care center. I have read the completed application and this form, understand the rules of the Boys & Girls Club and request who my child be admitted into membership.

☐ I *do not* give permission for my child's picture, moving pictures, or any other graphic depiction or likeness, to be used by the Boys & Girls Club and its activities. I also understand who the Club is not, nor does it claim to be, a licensed day care center. I have read the completed application and this form, understand the rules of the Boys & Girls Club and request who my child be admitted into membership.

I give my permission to the Boys & Girls Club of Fitchburg and Leominster, to 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 Club of Fitchburg and Leominster, including data collected via surveys or questionnaires. All information provided to BGCA will be kept confidential.

Parent /Guardian Name (Please Print)
Parent/Guardian Signature
Club Member's Signature
Stab Welliott & Signature
Date: / /



# **PICK-UP ARRANGEMENTS**

Please Print Parent/Guardian Name

Because there can be variations in the weekly dismissal arrangements, it is helpful for us to know the general plans you have made to transport each child at the end of the day.

STUDENT (Please	Print)
DAY	Pick-up Driver's Name Phone #
MONDAY	1. Pick-up- 2. Approved Alternate-
TUESDAY	1. Pick-up- 2. Approved Alternate
WEDNESDAY	1. Pick-up- 2. Approved Alternate-
THURSDAY	1. Pick-up- 2. Approved Alternate-
FRIDAY	1. Pick-up- 2. Approved Alternate-
If the driver is running assistance:	g late and we cannot reach the driver by phone, we may call the person listed below for
Name (Please Print)	TEL#
Parent/Guardian Signa	ature Date

Date