



BOYS & GIRLS CLUBS
OF THE FOX VALLEY

117 S. Locust St.
Appleton, WI 54914
(920) 731-0555

Office Use Only:
Unit: _____
ID Number: _____
Date: _____
Comments: _____

Annual Membership Application

\$15 per member or \$35 per family

First Name:	Middle Name:	Last Name:	Nick Name:
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>

Gender:

- Male
 Female

Ethnicity:

- Hispanic/Latino Not Hispanic/Latino

Race:

- Black / African American or African
 American Indian / Alaskan Native
 Asian
 Native Hawaiian / Pacific Islander
 White / Caucasian
 More than one race
 Unknown

Birth Date (mm/dd/yy):

Member Status (Check One)

- New Member
 Renewing Member
 Former Member
 Non-Member

Address:

City:

State:

Zip:

Home Phone Number:

Marital Status of Parent/Guardian at this address:

- Single
 Married
 Divorced
 Widowed
 Domestic Partner

Email Address:

School:

Grade:

ADULT CONTACTS

Check box if contact lives with child:

	First & Last Names	Phone #1	Phone #2	Employer	Relationship to Child
<input type="checkbox"/>	Parent/Guardian: _____	_____	_____	_____	_____
<input type="checkbox"/>	Parent/Guardian: _____	_____	_____	_____	_____
<input type="checkbox"/>	Emergency Contact: _____	_____	_____	_____	_____
<input type="checkbox"/>	Other: _____	_____	_____	_____	_____
<input type="checkbox"/>	Other: _____	_____	_____	_____	_____

If your child is 13 or younger, do you want to require that they only be allowed to leave the Club with an individual you have authorized? Please see "Authorized Pickup" information on page 3 before answering.)

YES NO

Household Size: # under 18: # over 65:

- Child Lives With: Mom Step-Mom Dad Step-Dad Grandparent(s) Foster parent(s) Other
- Head of Household: Male Female Both
- Special Housing Circumstances: Homeless Emergency Shelter Harbor House Other _____
- Household Annual Income Level: \$

Parent/Guardian in the Military? Yes No If Yes, which Branch? _____
If Yes, which parent? _____

List All Medications Your Child is Taking:

Medical Concerns including Allergies (Please Print)

Physician: Physician's Phone:

Preferred Hospital or Clinic: Hospital/Clinic Phone:

Do You Have Insurance? Yes No Insurance Company: Policy Number:

Has your child been a Member of the Boys & Girls Clubs in another community previously? Yes No Number of Years: Which Club:

Is your child a regular participant in other area youth programming? (Circle all that apply):

- | | | | | |
|--------------------|-----------------------|---|------------|----------------------|
| 4-H | Best Friends | Big Brothers/Big Sisters | Boy Scouts | Boys & Girls Brigade |
| Church Youth Group | Girls Scouts | Junior Achievement | PALS | YMCA |
| YouthGo | Youth Sports @ School | Youth Sports Other (e.g. Little League, Pop Warner Football, etc..) | | |
| Other: _____ | | | | |

Please Read Carefully

Accidents – I understand that I will be liable for any costs for any injury my child may incur during participation in Club activities and I understand and assume the risks associated with my child's participation in the Club which may include team sports and fitness activities.

Medical Emergency -- In the event of an emergency, I understand every attempt will be made to contact me. If I cannot be reached, I hereby give my permission to the physician selected by the Boys & Girls Club staff to secure proper treatment for my child.

Open Door Policy – I understand that the Boys & Girls Clubs of the Fox Valley has an open door policy. This policy means that the child is welcome at any time during open hours and that it is my responsibility to ensure my child knows my expectations about how, when and with whom they are allowed by me to leave the site.

Media/Photo Permission – I give my permission to have my child appear in any media coverage and communications materials for the Boys & Girls Clubs of the Fox Valley.

Travel Policy – I authorize Boys & Girls Club to transport my child on field trips within an approximate 15-mile radius of the Club during normal Club operating hours. No additional permission slip is required.

Pick-up Policy – I understand that if my child is not picked up on time when the Club is closed, I will be charged a fee. I also understand that if my child is not picked up within 15 minutes of closing time, the Club may contact the police.

Measurement Surveys - I also agree that my child may complete periodic outcome surveys that help measure the changes that occur in children as a result of being involved with the Boys & Girls Club.

Truthfulness – I attest that the information contained in this membership application is true and complete and that I am a custodial parent or guardian of the child named herein.

Parent or Guardian Name (Print) _____ Parent or Guardian Signature _____ Date _____



Membership Application Page #3

Authorized Pick-Up Policy

If you want to require that your age 13 or younger child only be allowed to leave the Club under the escort of an individual you have duly authorized, please circle "Yes" to this question at the bottom of page 1 of this application. If you choose to use "Authorized Pick-Up", please be aware of the following:

1. Authorized individuals will always need to come to the check in/out station to pick-up your child.
2. Authorized individuals may need to show a picture ID to verify identity. Please note that once an authorized individual becomes well known to Club staff, this step may no longer be necessary.
3. Checking-out of the Club will be a more lengthy process. Your patience is appreciated.
4. It is your responsibility to inform Club staff if you wish to add someone to your list of authorized individuals.
5. It will remain your responsibility to communicate with your child about how, when, and with whom they are allowed to leave the Club.
6. Your child will not have permission to leave the Club at any time without an authorized escort. Written notes from you or others will not be allowed to create exceptions to this.
7. All individuals listed on Page 1 of this application as an "Adult Contact" will be automatically considered authorized to pick up your child unless you specifically notify us on this membership application in writing that they are not authorized to pick up your child.

Please tell us about your child:

(Please include information on interests and hobbies as well as any special needs, disabilities, or language barriers that may help Club staff best interact with your child.)



BOYS & GIRLS CLUBS
OF THE FOX VALLEY

Club Member Policies

1. All new Club members along with a parent or guardian are expected to attend a new member orientation within one month of membership.
2. Members must show their Club card upon entering the Club each day. In the event that a member forgets his/her card, an OK pass for admittance will be provided at a cost of .25. Lost or broken cards may be replaced at a cost of \$1.00. Guests may visit the Club up to three times at no cost.
3. Club members when absent from school due to illness of any kind may not attend Club activities on those days.
4. All prescription and non-prescription medication must be dispensed by Club staff. Medication must be accompanied by a signed, current Medicine Dispensing Agreement (available at Membership Desk).
5. The Club has a dress code policy for its members which is available at the Membership Desk.
6. The Boys & Girls Club Fox Valley is not responsible for lost or stolen items, or money lost in vending machines. The Club asks that members not bring valuable items or excessive cash to the Club.
7. Pagers, Cell Phones, and Personal CD / Tape Players are not allowed at the Club. Members carrying these items will be asked to place these items at the Membership Desk until their departure. Members who refuse to do so will be asked to leave the facility.
8. Club members, parents, and Club staff share the responsibility to create and maintain a safe and positive environment at the Boys & Girls Club. Club staff will address inappropriate behavior with members directly, using generally accepted behavior management techniques, and will communicate significant behavior issues and concerns with parents or guardians. Parents are expected to encourage positive behaviors for their child(ren). Members will be subject to the loss of privileges up to and including the suspension of their membership for flagrant violation of Club rules or continued poor behavior.