



BOYS & GIRLS CLUBS
OF MONTEREY COUNTY

Teen Membership Application

The annual fee is \$10 per member.
To renew a membership, complete a Renewal form and submit \$10.
Youth must be between the ages of 13 & 18.
If a child is 13 or 14, proof of age (i.e. birth certificate) must be presented upon registration.
A parent/guardian and the new member(s) must attend a New Member Orientation.
ORIENTATIONS: Every Monday & Wednesday at 5:00pm

BGCMC ONLY	Rcvd By: _____
Date Rcvd: _____	Amount Rcvd: _____
_____	_____

Parent/Guardian #1 (Head of Household):

First Name: _____

Last Name: _____

Home Address: _____

City, State, Zip: _____

Mailing Address (if different): _____

City, State, Zip: _____

Phone Number 1: _____

Phone Number 2: _____

Email Address: _____

◆ Employer: _____

◆ Occupation: _____ Ag Industry?
 YES NO

◆ Military? YES NO
If YES, BRANCH: Airforce Army CoastGuard Marine
 Navy
If YES, STATUS: Active Reserve Guard
If YES, RANK: _____ DUTY STATION: _____

Parent/Guardian #2:

First Name: _____

Last Name: _____

Home Address: _____

City, State, Zip: _____

Mailing Address (if different): _____

City, State, Zip: _____

Phone Number 1: _____

Phone Number 2: _____

Email Address: _____

◆ Employer: _____

◆ Occupation: _____ Ag Industry?
 YES NO

◆ Military? YES NO
If YES, BRANCH: Airforce Army CoastGuard Marine
 Navy
If YES, STATUS: Active Reserve Guard
If YES, RANK: _____ DUTY STATION: _____

Household Information

◆ Family Size: _____ ◆ Annual Household Income: _____

◆ Primary Language: _____

◆ Family Setting:
 Both Parents Mother Only Father Only Grandparents
 Foster Parents Legal Guardian Other Family Member
 Other: _____

New Member #1:

First Name: _____

Last Name: _____

Middle Name: _____ Nick Name: _____

Ethnicity:
 African American Asian Caucasian Indian
 Latino
 Native American Pacific Islander 2/More Races
 Other

New Member #2:

First Name: _____

Last Name: _____

Middle Name: _____ Nick Name: _____

Ethnicity:
 African American Asian Caucasian Indian
 Latino
 Native American Pacific Islander 2/More Races
 Other

Gender: Male Female

◆ Eligible for Free/Reduced Lunch:
 YES NO

Date of Birth:

School: School District:

Grade: ◆ Student ID Number:

Medical Problems/Allergies:

Gender: Male Female

◆ Eligible for Free/Reduced Lunch:
 YES NO

Date of Birth:

School: School District:

Grade: ◆ Student ID Number:

Medical Problems/Allergies:

APPLICATIONS WILL NOT BE ACCEPTED UNLESS ALL FIELDS ARE COMPLETE & \$10 PER MEMBER IS ATTACHED.

◆ Emergency Contact #1:

Name: _____

Relationship: _____

Authorized to pickup member: YES NO

Phone Number: _____

◆ Emergency Contact #2:

Name: _____

Relationship: _____

Authorized to pickup member: YES NO

Phone Number: _____

◆ Required Consents

PHOTO & IMAGE RELEASE: I acknowledge that BGCMC and/or its sponsors may use and print digital photographs as well as video of the children/youth named on this application for internal and external use. Pictures or videos of Members taken involving BGCMC programs or activities used for promotion are the property of BGCMC. I consent to such uses and hereby waive all rights of compensation.

 YES or NO _____ Initials

ACADEMIC RELEASE: I grant BGCMC my permission to access my children/youth's school records, including attendance, behavior, grades, transcripts and standardized test scores; to speak with teachers, counselors, school administrators and educational partners in order to obtain and exchange information as part of the Academic Success services provided by BGCMC. I understand that BGCMC may share information about the children/youth listed on this application with Boys & Girls Clubs of America (BGCA) and school districts for research purposes and/or to evaluate the program's effectiveness. Information that will be disclosed to BGCA and school districts 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 BGCMC, including data collected via surveys or questionnaires. All information provided will be kept confidential.

 YES or NO _____ Initials

WALK HOME POLICY: I allow my youth(s) to check themselves out of the Boys & Girls Club and walk home unsupervised.

 YES or NO _____ Initials

OPEN DOOR POLICY: The Boys & Girls Clubs of Monterey County (BGCMC) is NOT a licensed day care provider as defined in Section 8300 of the California Educational Code. We strongly encourage members to stay inside the building where there is supervision; however we emphasize that we maintain an 'Open Door Policy'. It is the parent's responsibility to instruct their children/youth as to whether or not they are allowed to leave the Club's supervised areas.

_____ Initials

MEDICAL EMERGENCY AUTHORIZATION: In the event of a medical emergency involving my children/youth during a BGCMC sponsored activity, I understand BGCMC will notify me, the parent/guardian as soon as possible. If parent/guardian cannot be located and the children/youth are in need of immediate medical attention, I authorize the Boys & Girls Clubs of Monterey County staff to act as my agent to consent to appropriate medical attention.

_____ Initials

CONSENT TO SURVEY: I grant my permission for my children/youth to participate in individual, group and internet surveys used specifically for the purpose of evaluating the impact of BGCMC programs.

 YES or NO _____ Initials**TRANSPORTATION RELEASE:**

Afterschool "Catch The Bus" Program: BGCMC provides free transportation for youth attending designated local schools. A Boys & Girls Club bus transports students to the Seaside Club (1332 La Salle Avenue) or Salinas Club (85 Maryal Drive) Monday through Friday immediately after school. Students must arrange their own transportation when they depart from the Club. Transportation is not offered during school breaks. I give my child permission to be transported from their school to the Seaside Salinas Club.

_____ Initials

Field Trips & Special Events: Occasionally BGCMC provides field trips for youth, who are transported to locations other than the primary club your child attends. In these instances, I give my child permission to be transported by BGCMC.

 YES or NO _____ Initials

INFORMATION TECHNOLOGY RELEASE: I grant BGCMC permission for my youth to have access to and use of any computer or technology resource on BGCMC network or on the premises. I give my youth permission to use the BGCMC local area networks and Internet gateway. BGCMC will not be responsible for any damage users may suffer, including but not limited to, loss of data, exposure to inappropriate material or people, or for financial obligations arising through the unauthorized use of the system. Students or parents of students will indemnify and hold BGCMC harmless from any losses sustained as the result of misuse of the system by student.

 YES or NO _____ Initials

PARENT/GUARDIAN AGREEMENT: I understand that a member of BGCMC staff will be in charge at all times and will take all necessary precautions for the health and safety of the group. It is expressly understood and agreed that the BGCMC shall not be held responsible, nor legally liable for any losses of personal property, or for any bodily injuries or the results thereof, incurred and suffered by my child on any property of the Boys & Girls Club or in connection with any activities, unless such loss or injury results directly from negligence or a willful act of an employee of the Boys & Girls Clubs of Monterey County acting within the scope of their employment.

_____ **Initials**

I agree to the terms and conditions described above and understand that by signing this agreement, I acknowledge that I have read and accept the policies of BGCMC. I understand that I can change my permissions at any time by filling out a membership application.

Parent/Guardian Signature: _____

Date:
