



BOYS & GIRLS CLUB
OF DOUGLAS

2011 Summer Registration

Child's Name: _____ Age: _____ Birth Date: _____ Shirt Size: _____ Y A
 _____ Age: _____ Birth Date: _____ Shirt Size: _____ Y A
 _____ Age: _____ Birth Date: _____ Shirt Size: _____ Y A
 _____ Age: _____ Birth Date: _____ Shirt Size: _____ Y A
 _____ Age: _____ Birth Date: _____ Shirt Size: _____ Y A

Mother (Guardian): _____ Father (Guardian): _____

Work Phone: _____ Cell: _____ Work Phone: _____ Cell: _____

Physical Address: _____
Street City State Zip

Mailing Address: _____

Emergency Contact #1 (other than parent) : _____ Phone: _____

Emergency Contact #2 (other than parent) : _____ Phone: _____

Field Trips – There will generally be a field trip each Monday. Children will leave the building at 12:00-12:30 and return prior to 4:30 PM.

Yes, my child(ren) may participate in all field trips No, my child(ren) may not participate in field trips
 Yes, I wish to volunteer for field trips No, I am unable to help with field trips

Choose which weeks you need to reserve.

All 11 Weeks, May 31 – August 19
 Week 1, May 31 – June 3 Week 5, June 27 – July 1 Week 9, Aug 1 – 5
 Week 2, June 6 – 10 Week 6, July 5 – 8 Week 10, Aug 8- 12
 Week 3, June 13 – 17 Week 7, July 11 – 15 Week 11, Aug 15-19
 Week 4, June 20 – 24 Week 8, July 25 – 29

Program Fees: \$15.00/Day or \$60/week – For Members Kindergarten – 5th Grade – Above are free with paid membership.

Payment for program fees is expected at the end of each week.

I will pay the above stated program fees.
 I will secure assistance from DFS.
 I meet TANF income limitations and will complete and submit application.
 I do not meet TANF income limitations, but wish to apply for Summer Program scholarships

No child will be denied club membership due to parent's inability to pay membership and fees. However, members will be denied access to club if parent(guardian) does not take initiative to apply for DFS, TANF, or scholarship assistance.

Signature of Parent (Guardian) responsible for payment of membership and program fees.

Printed Name

Signature

Date

By signing above I acknowledge that I have read and understood all of the policies and procedures pertaining to the Summer Program at Boys & Girls Club of Douglas (BGCD). I give BGCD permission for my child to utilize surrounding property while supervised by BGCD staff during Club hours. I give the Boys & Girls club of Douglas permission for my child to attend all field trips associated with the Summer Day Camps.

Member's Name: _____

Date: _____

Are there any serious health problems that the staff should be aware of? ____ Yes ____ No

If yes please explain: _____

Are there any behavioral problems that the staff should be aware of? ____ Yes ____ No

If yes please explain: _____

Is your child on any medications that the staff should be aware of? ____ Yes ____ No

If yes please explain: _____

PARENT/ GUARDIAN:

Your consent is confirmed by initially beside each statement.

____ I hereby give permission to my child to become a member of The Boys and Girls Club of the Douglas.

____ I understand the Boys and Girls Club of Douglas has an open door policy and that the Boys and Girls Club of Douglas is not responsible for the time or manner in which my child may arrive or leave the Club. We however do our very best to require proper sign in and out to make sure the youth get home safely.

____ I have received a 2011 Summer Program Handbook. I have read and understand the BGCD policies it contains.

____ **I understand that in case of emergency, a reasonable effort will be made to contact me. In the event that the emergency contact or I cannot be reached, I hereby give permission to the Boys and Girls Club of Douglas to secure proper treatment (including surgery) for my child.**

____ I understand that the Boys and Girls Club of Douglas is NOT responsible for personal items brought to the club, whether lost, stolen, or otherwise missing. Members are encouraged to leave such items at home.

____ Club staff will **NOT** medicate children. **Parents/guardians are ENTIRELY responsible** for medications and for personally arranging for or ensuring the **proper and timely medicating of their children.**

____ In addition, I authorize the use and reproduction of any and all photographs and video footage which may be taken in connection with Club activities to the Boys and Girls Club of Douglas.

Permission to walk home from Club – Please Initial ONE:

____ My child has my permission to walk home from the Boys and Girls Club of Douglas

____ My child may NOT walk home from the Boys and Girls Club of Douglas.

I give my teen permission to check out WITHOUT an adult. Yes ____ No ____ **Initial** _____

Your child will be permitted to check out alone each day but will be considered gone for that day.