



BOYS & GIRLS CLUB
OF THE GRAND STRAND

2023 / 2024

MEMBERSHIP APPLICATION

ALL INFORMATION MUST BE COMPLETED
AND \$10.00 MEMBERSHIP FEE COLLECTED
BEFORE THIS APPLICATION CAN BE PROCESSED
MEMBERSHIPS ARE RENEWED ANNUALLY
PLEASE PRINT

Date: _____

MEMBER'S BASIC INFORMATION:

First Name: _____ Middle: _____ Last: _____

Address: _____

City: _____ State: _____ Zip: _____

Child's Date of Birth: ___/___/___ Age? _____ Grade: _____ Primary Phone (____) _____

Child's Gender? Male Female

Child's Ethnicity? African-American Asian Caucasian Hispanic

Native American Multi-Racial

PARENT / GUARDIAN INFORMATION:

| Primary - Parent / Guardian | Secondary - Parent / Guardian |
|---|---|
| Name: _____ | Name: _____ |
| Relationship to Child _____ | Relationship to Child _____ |
| Address: _____ | Address: _____ |
| City, State, Zip: _____ | City, State, Zip: _____ |
| Phone # (____) _____ | Phone # (____) _____ |
| Telephone Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work | Telephone Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work |
| Phone # (____) _____ | Phone # (____) _____ |
| Telephone Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work | Telephone Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work |
| Email: _____ | Email: _____ |
| Employer: _____ | Employer: _____ |
| Job Title: _____ | Job Title: _____ |
| (Primary Parent / Guardian is by definition always authorized to pick up the Child!) | Authorized to Pick up Child? <input type="checkbox"/> Yes <input type="checkbox"/> No |

MEMBER'S SCHOOL INFORMATION:

Name of Child's School: _____
 Primary Elementary Intermediate Middle School High School Other
Teacher's Name: _____ Grade _____
School Meal Cost Status? Free Reduced Regular
(Please provide us with documentation from the school regarding your child's FREE or REDUCED cost meal status)

MEMBER'S MEDICAL INFORMATION:

Doctor's Name: _____ Doctor's Phone: (_____) _____
Does your family have health and/or accident insurance? Yes No
Insurance Carrier: _____
Policy # _____ Group # _____
Does your child have any serious health problems? Yes No
If Yes Explain? _____
Is your child currently taking any medications? _____
Known Allergies?: _____

Please Note: It is recommended that you provide the Boys & Girls Club with a copy of your child's shot record from his or her doctor or school for our files in case of an emergency.

PRIMARY HOUSEHOLD FINANCIAL INFORMANTION:

PLEASE NOTE: Your family's financial information helps the Boys & Girls Club of the Grand Strand apply for grants and corporate donations (so we can keep program fees affordable). All information is kept strictly confidential.

Estimated total annual gross income for all persons living in the child's primary household?
(Primary household refers to the home where your child lives the majority of the time)

| | | |
|--|--|--|
| <input type="checkbox"/> \$0 - \$ 5,000 | <input type="checkbox"/> \$25,001 - \$30,000 | <input type="checkbox"/> \$55,001 - \$60,000 |
| <input type="checkbox"/> \$ 5,001- \$10,000 | <input type="checkbox"/> \$30,001 - \$35,000 | <input type="checkbox"/> \$60,001 - \$65,000 |
| <input type="checkbox"/> \$10,001 - \$15,000 | <input type="checkbox"/> \$35,001 - \$40,000 | <input type="checkbox"/> \$65,001 - \$70,000 |
| <input type="checkbox"/> \$15,001 - \$20,000 | <input type="checkbox"/> \$40,001 - \$45,000 | <input type="checkbox"/> \$70,001 - \$75,000 |
| <input type="checkbox"/> \$20,001 - \$25,000 | <input type="checkbox"/> \$45,001 - \$50,000 | <input type="checkbox"/> \$75,001 -or More! |

Total number of people (Adults & Children) living in the child's primary household _____
Number of people under the age of 18 years living in child's primary household _____

Is there a member of the child's primary household who is 65 years old or older? Yes No
Is there a member of the child's primary household who is handicapped? Yes No
Is there a member of the child's household who serves in the US Military? Yes No
Branch of Service: _____

Is your family currently receiving **SNAP (Food Stamp)** benefits? Yes No

Member lives in primary household with? (Check all that apply): Mother Father

Step-Mother Step-Father Grandmother Grandfather Foster Parent:

Other (Please Describe)? _____

Name of Parent/Guardian who is Head of the child's primary household? _____

Is the Child's Primary Household a Single-Parent Household? Yes No

If Yes, Single Parent Head of Household is? Female Male

Please list siblings (Brothers & Sisters) who are currently MEMBERS of the Boys & Girls Club of the Grand Strand?

| | | | | | | | |
|-------|--------|-------|-------|-------|--------|-------|-------|
| _____ | (Name) | _____ | (Age) | _____ | (Name) | _____ | (Age) |
| _____ | (Name) | _____ | (Age) | _____ | (Name) | _____ | (Age) |
| _____ | (Name) | _____ | (Age) | _____ | (Name) | _____ | (Age) |

PAST MEMBERSHIP INFORMATION:

| | |
|---|---|
| Is your child renewing his or her membership with the Boys & Girls Club of the Grand Strand? <input type="checkbox"/> Yes <input type="checkbox"/> No | (For Staff Use) <input type="checkbox"/> Renewal? <input type="checkbox"/> New Member? |
|---|---|

If yes, when did your child first join the Boys & Girls Club of the Grand Strand? (Year) _____

FOR OFFICE USE: (Verifying staff member should check appropriate boxes & put initials following items that have been completed and/or verified)

Elementary Program (1st– 6th Grade) --or-- **The Club Teen Center (7th-12th Grade)**

Parent Signature on Application? _____ Parent has Completed Permission Forms? _____

Emergency Contact Info Sheet Completed? _____ SC-DJJ/Court Referral? _____

Academic Permission Allergies/Medications Y N Media Release

Parent / Legal Guardian Permission Form for: _____

(Please Print Child's Name Here)

Publicity Release:

I/we agree that Boys & Girls Club of the Grand Strand may photograph or videotape me or my child and Boys & Girls Club of the Grand Strand may use those photographs or video footage for its marketing purposes. I/we release Boys & Girls Club of the Grand Strand from any claim or liability related to that use, waive all claims for myself/ourselves, my heirs and assignee against Boys & Girls Club of the Grand Strand, their Board of Directors, volunteers or staff persons.

I do give my permission I do NOT give my permission

Parent/Legal Guardian Initials: _____

Field Trip Transportation Permission:

I understand that the Boys & Girls Club of the Grand Strand provides transportation for club members participating in field trips away from our service sites. Transportation is arranged via public & private carriers (taxi, school bus, city bus, etc.), club owned vehicles and occasionally the use of private vehicles driven by approved staff members and volunteers. I hereby release the Boys & Girls Club of the Grand Strand, its employees, volunteers, associates and contributors from any liability for any injury or loss sustained as a result of such transportation.

I acknowledge the above policy Parent/Legal Guardian Initials: _____

Sunscreen Application Permission

I understand that the members of the Boys and Girls Club of the Grand Strand participate in activities and field trips outdoors. I give permission for a designated BGCBS employee to assist in applying sunscreen as needed throughout the day to bare surfaces including the face, tops of ears, shoulders, arms, legs and feet.

I do give permission for my child to receive sunscreen I do NOT give permission for sunscreen

Medical Treatment Authorization:

I declare that I am the parent or legal guardian of the above named minor child and I have custody and control of this child. I realize that participation in Boys & Girls Club activities carries the risk of severe or permanent injury. In the event my child is injured or should require immediate medical attention, I hereby authorize Boys & Girls Club staff members and/or volunteers to secure any medical treatment for my child they deem necessary. I further acknowledge that I will be responsible for any medical, hospital, or ambulance fees and costs associated with my child's medical treatment. If possible, confirmation of any medical treatment should be made with me prior to any treatment. In case I cannot be reached, or case of emergency, Club Staff and/or volunteers may approve treatment for my child without further authorization.

Parent/Legal Guardian Signature

Date

Parent/Legal Guardian Printed Name

Primary Phone



BOYS & GIRLS CLUB
OF THE GRAND STRAND

Emergency Contact Information Sheet for _____

(Please Print Child's Name Here)

Please PRINT & fill out all Information completely.

| | |
|---|---|
| <p>Emergency Contact</p> <p>Name: _____</p> <p>Relationship to Child _____</p> <p>Address: _____</p> <p>City, State, Zip: _____</p> <p>Phone # (_____) _____</p> <p>Telephone Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work</p> <p>Phone # (_____) _____</p> <p>Telephone Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work</p> <p>Email: _____</p> <p>Employer: _____</p> <p>Job Title: _____</p> <p>Authorized to Pick up Child? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>Emergency Contact</p> <p>Name: _____</p> <p>Relationship to Child _____</p> <p>Address: _____</p> <p>City, State, Zip: _____</p> <p>Phone # (_____) _____</p> <p>Telephone Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work</p> <p>Phone # (_____) _____</p> <p>Telephone Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work</p> <p>Email: _____</p> <p>Employer: _____</p> <p>Job Title: _____</p> <p>Authorized to Pick up Child? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |
| <p>Emergency Contact</p> <p>Name: _____</p> <p>Relationship to Child _____</p> <p>Address: _____</p> <p>City, State, Zip: _____</p> <p>Phone # (_____) _____</p> <p>Telephone Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work</p> <p>Phone # (_____) _____</p> <p>Telephone Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work</p> <p>Email: _____</p> <p>Employer: _____</p> <p>Job Title: _____</p> <p>Authorized to Pick up Child? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | <p>Emergency Contact</p> <p>Name: _____</p> <p>Relationship to Child _____</p> <p>Address: _____</p> <p>City, State, Zip: _____</p> <p>Phone # (_____) _____</p> <p>Telephone Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work</p> <p>Phone # (_____) _____</p> <p>Telephone Type: <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Work</p> <p>Email: _____</p> <p>Employer: _____</p> <p>Job Title: _____</p> <p>Authorized to Pick up Child? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> |



**BOYS & GIRLS CLUB
OF THE GRAND STRAND**

Expectations for Club Member Behavior

Protecting our kids is our #1 priority. To help make sure our Clubs are safe and orderly environments that support positive youth development, it is important that everyone understands our expectations for behavior. The Boys & Girls Club of the Grand Strand (BGC GS) has rules of conduct that define disruptive and unsafe behaviors and the consequences that may result from poor behavioral choices. In addition to the expectations defined by the Board of Directors of the organization, each Club site may have rules determined by Club site staff. Club site staff may, “add-to”, but not “take-away” from organizational rules of conduct. Club member disciplinary matters are best handled at the lowest supervisory level possible and in the timeliest, reasonable manner. In most cases, minor disciplinary matters are handled by the youth development staff. As disciplinary matters become more serious, Unit Managers, the organization’s Executive Director, and/or the organization’s Board of Directors may become involved.

Club member behavioral violations are divided into three levels and the possible consequences for those violations are described below:

Level I -

Disorderly Conduct is defined as activities that impede orderly Club procedures, instructional activities, operation of the Club, or frequent and/or serious disturbances. Acts of disorderly conduct may include, but are not limited to, the following: lying, profanity, dress code violations, disturbing programs or activities, disrespecting staff or other club members. Disciplinary consequences for Level I offenses include, but are not limited to, one or more of the following:

- Verbal warning
- Withdrawal of privileges/exclusion from activities such as field trips or special activities
- Call to parent
- Conference with parent

Level II -

Disruptive Conduct is defined as those activities engaged in by a Club member that are directed against persons or property. Vandalism of Club property or property of other members. Violence to oneself or others which tend to endanger the health or safety of oneself or others. We have a “ZERO TOLERANCE” policy. Acts of disruptive conduct may include, but are not limited to, the following: abusive language to staff or other members, bullying, cyber bullying, computer violation, tobacco/drug violation, refusal to obey staff, threats to staff or other members, and stealing. Disciplinary consequences for Level II offenses include, but are not limited to, one or more of the following:

- Member Suspension
- Letter to parent
- Parent Conference
- Referral to an outside agency
- Restitution of property and damages
- Membership probation
- Cancellation of membership
- Other sanctions provided in Level I.

Level III -

Criminal Conduct is defined as those activities engaged in by a Club member which result in violence to oneself or to another's person or property, or which pose a direct and serious threat to the safety of oneself or others. These activities usually require administrative actions that result in the removal of the youth from the Club, the intervention of law enforcement authorities, and/or action by the Board of Directors. Acts of criminal conduct may include, but are not limited to, the following: bomb threats, false fire alarms, aggravated assault, threat to staff, simple assault/fighting, possession of weapons, hazing, computer crime, and drug possession (including prescription drugs).

Possible disciplinary consequences for Level III offenses include, but are not limited to, one or more of the following:

- Referral to Law Enforcement
- Restitution of property damages and/or
- Cancellation of club membership
- Other sanctions provided in Level I and/or Level II

Club members who find themselves involved in disciplinary proceedings are afforded due process, to include an opportunity for a hearing and an appeals process for disciplinary rulings.

Referral to Law Enforcement

When a Club member's behavior also constitutes a violation of the law, Club officials will notify law enforcement. Club members with serious behavioral infractions may be subject to consequences determined by the Club with separate consequences determined through the State's judicial system.

Dress Code

Club members are responsible for dressing in an appropriate manner at all times while on a Club campus or while involved in Club or organizational sponsored events/activities. Generally, Club member attire is considered appropriate as long as it does not, or could not, interfere with Club operations, cause disruption, or damage to Club property. In addition to clothing, hats, and shoes, Club member attire includes any jewelry, emblem, badge, symbol, sign, comment, or other items worn or displayed by an individual. The following guidelines help to define appropriate dress:

- Attire must comply with requirements for health and safety
- Attire must not be immodest, obscene, profane, lewd, vulgar, indecent, or offensive
- Shorts, skirts, and dresses should be of adequate length to assure modesty
- Under garments must be worn at all times
- Outer garments must conceal undergarments
- Tops with "spaghetti straps" are inappropriate, as are tops that reveal cleavage
- Hats are not to be worn in the Club (unless needed for a health condition)
- Tight "spandex" clothing is inappropriate
- Attire must not evidence membership or affiliation with a gang in any negative sense of the term
- Attire must not display any information about, representations of, or advertisements for alcoholic beverage(s), tobacco, controlled drugs, illegal drugs or paraphernalia associated with the foregoing. Additional guidelines may be established by the Club Site Director. Each Club is responsible for requiring students to comply with the dress code and taking disciplinary action if needed

BGCA Safety Tip Line

The Boys & Girls Club of America provides a Club safety tip line so that Club staff, Club members and parents can report information that could possibly indicate a threat to personal or Club safety. If you are not able to report information to a BGCGS official, call the BGCA anonymous tip line which is available 24 hours a day, 365 days a year at 866-607-7233 (SAFE).



**BOYS & GIRLS CLUB
OF THE GRAND STRAND**

**Expectations for Club Member Behavior
Acknowledgment Form**

(Date)

I, _____ declare that I have read and/or talked with my
(Please Print Child's Name Here)

parent or legal guardian about the BGCGS's Expectations for Club Member Behavior and I understand what is expected of me as a Club member.

I, _____ declare that I am the parent or legal guardian
(Parent/Legal Guardian Printed Name)

of the above named minor child who is a Club member at the Boys & Girls Club of the Grand Strand, and I have custody and control of this child. I acknowledge that both my child and I have read and talked about the BGCGS's Expectations for Club Member Behavior and I understand what is expected of my child.

(Parent/Legal Guardian Signature)



BOYS & GIRLS CLUB
OF THE GRAND STRAND

Academic/Scholastic Authorization 2023-2024

Parent / Legal Guardian Permission for: _____
(Print Child's Name)

I understand that the Boys & Girls Club of the Grand Strand offers literacy & homework assistance programs to help Club members succeed in school. I hereby authorize my child's school, guidance counselors, and teachers to release the following information to the Boys & Girls Club of the Grand Strand:

- Interim Reports
- Report Cards
- Lexile Reading Scores
- MAP, ACT, SAT Scores
- EOC (End of Course) Test Scores
- Transcripts
- ELL Classification
- IEP Status

I understand that in order to provide individualized assistance for my student that the Boys & Girls Club of the Grand Strand will access my youth's Power-school (Middle/High School Students).

I hereby give my permission to the Boys & Girls Club of the Grand Strand to access my youth's academic/scholastic records as described above.

Printed Name Legal Parent/Guardian

Signature Legal Parent/Guardian

Date



In consideration of my child/children’s participation in youth programs of the Boys & Girls Club of the Grand Strand, I agree to the following:

1. I agree to pay a non-refundable membership fee of \$10.00 per calendar year (January – December) for each of my school-aged children participating in youth programs at the Club regardless of the month I sign my child up.

2. **I agree to pay the fees for the applicable Club programs my child is enrolled in, for any length of time attended throughout the week of service. I understand that enrollment and payment of fees in advance of service reserves my child’s slot in the program(s).** Please provide 14 days, advance written notice of withdrawal from any of our programs. Those members will not be able to enroll in our programs until payment is made on unpaid fees.

3. **All program service fee payments are due on or before FRIDAY by the closing time of Afterschool or Summer Day Camp and prior to the upcoming week of service**. I understand that a \$5.00 weekly late fee per child will be charged for any payments received after Friday of the Afterschool or Summer Day Camp closing time.** I understand that the Boys & Girls Club of the Grand Strand does not prorate fees for partial weeks attended and that daily rates are not available.

4. I understand that all checks returned by the Bank to the Boys & Girls Clubs of the Grand Strand for any reason will be subject to a **\$25.00 NSF fee** charged to my account and I may be subject to additional fees and charges from a collections agency. Parents who have bounced one check can no longer make any payment by check and will be required to pay all future fees in cash or by debit or credit card. **The Boys & Girls Club of the Grand Strand does not make change for cash payments or credit card payments made for more than the amount due – any overpayment will be treated as a credit towards future charges.**

5. I agree that I will pick my child up by the closing time or earlier of program services; I also understand that it is my responsibility to provide alternate arrangements for pick-up of my child if I am unavailable to do so. **I understand that in the event that my child is not picked up by the closing time, a late fee of \$1.00 per minute/per child must be paid the following day.** At 30 minutes past the closing time law enforcement officials and SC DSS may also be contacted if we have not heard from a parent/guardian or an emergency contact.

6. I understand that the Boys & Girls Club of the Grand Strand reserves the right to remove my child from Youth Programs for any good cause which includes but is not limited to: Continued late payment, continued late pick up, refusal to pay any Club fees, disruptive and/or threatening behavior on the part of parents/guardians, family members or youth members, repeated child behavior issues, bullying or failure to comply with Club policies. If a child has been removed from our program but continues to be dropped off at the Club site, then Club officials will have no choice but to contact law enforcement and SC DSS officials to report child neglect.

7. **After two weeks of non-payment, you will be notified of the late payments. If payment is not caught up by the next business day, then your child will be removed from the program until further notice or until your account balance is caught up.**

6. **I agree to pay ALL fees for my child/children by the date due.** Parents who are paid by their employer on a monthly, semi-monthly or bi-weekly basis should pay their child/children’s fees in advance accordingly. **I understand that all fee payments are Non-Refundable and Non-Transferable.** If an adjustment to a payment is necessary only a credit towards future services will be provided. This policy allows us to better plan for staffing and program supplies needed to provide quality services to all members.

Child’s Printed Name(s) _____

Parent/Guardian Printed Name

Parent/Guardian’s Signature

Date