

(for office use only)

The Salvation Army
Boys & Girls Club of Conway/Horry
Membership Application
Annual Fee: \$10.00

- After School (Grade K-8, Registration Fee: 15.00)
- Summer (Grade K-8, Registration Fee: _____)
- Basketball or Other: _____
(Registration Fee: _____)
- New Renewing

Processed by: _____

Date: _____

YOUTH INFORMATION

Member's Name: _____ T-shirt Size: _____ Gender: M _____ F _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Date of Birth: ____/____/____ Age: _____

School Attending: _____ Grade (in Sept 2018): _____

Teacher's Name (Homeroom Teacher for Middle and High School): _____

After School Weekly Fee: \$30.00 per week
(See After School Program handbook for details)

Transportation Fee: \$5.00 per week

Qualify for reduced fee: Yes No

Member weekly rate: \$_____

PARENT INFORMATION

Father's Name: _____ Cell: (____) _____ Work phone: (____) _____
(first & last name)

Mother's Name: _____ Cell: (____) _____ Work phone: (____) _____
(first & last name)

Emergency Contact: _____ Phone/Cell: (____) _____ Relationship _____
(other than parent / guardian and over 18 years old) Allowed to sign member out: Yes No

Emergency Contact: _____ Phone/Cell: (____) _____ Relationship _____
(other than parent / guardian and over 18 years old) Allowed to sign member out: Yes No

Emergency Contact: _____ Phone/Cell: (____) _____ Relationship _____
(other than parent / guardian and over 18 years old) Allowed to sign member out: Yes No

Member lives with: Both Parents Mother Father Guardian Stepmother Stepfather Grandparents

MEDICAL INFORMATION

Please list any medical restrictions, allergies, or dietary restrictions your child may have: _____

Any condition now requiring regular medication? Yes No Name of medication: _____

Any restriction of activity for physical, emotional or psychological reasons? Yes No Explain: _____

Does your family have health and/or accident insurance: Yes No

Family Health Plan Name: _____ Policy #: _____ Group #: _____

Permission for Treatment by Physician/Hospital: Yes / No

Physician's Name: _____ Physician's Phone: (____) _____

HOUSEHOLD INFORMATION

NOTE: This information is collected for grant writing purposes ONLY

Ethnic/Racial Origin: Caucasian African American Hispanic Asian Native American

Multi-Racial Other: _____ (please specify)

Number in Household: _____ ♦ Current Head of Household: Female Male ♦ Single Parent Household: Yes No

Estimated Yearly Household Income: _____ Military Family: _____
(branch)

PARENT: PLEASE READ AND SIGN THE FOLLOWING:

I hereby give permission to my son/daughter to become a member of The Salvation Army Boys & Girls Club of Conway/Horry. I understand that the Club and its personnel are not responsible for personal injury or loss of property. I agree to observe whatever rules are decided upon as best for the welfare of all. The Salvation Army Boys & Girls Club of Conway/Horry reserves the right to dismiss a member and/or non-member from the Club. Refunds will not be made due to dismissal. Permission is given to use photos or motion pictures for publicity purposes.

I, the undersigned, understand that there are risks and dangers inherent in participating in The Salvation Army Boys & Girls Clubs, which may include transportation. I also understand that in order to be allowed to participate in this Activity and associated Activities, I must agree not to hold The Salvation Army liable for any injury or damage which I may suffer while participating in any Activity or going to/from any Activity. Knowing this, and in consideration of being permitted to voluntarily participate in any Activity, and recognizing the charitable nature of The Salvation Army, I hereby voluntarily release The Salvation Army from any and all liability resulting from or arising in any manner at all out of any participation in any Activity.

I understand and agree that I am releasing not only The Salvation Army, but also its officers, agents, and employees. I understand and agree that this waiver/release will have the effect of releasing, discharging, saving and forever relinquishing any and all actions or causes of action that I may have or have had, whether past, present, or future; whether known or unknown, and whether anticipated or unanticipated by me, whether through acts or omissions by The Salvation Army's personnel or other unrelated third parties or other participants.

I understand and agree that this waiver/release will be binding on me, my spouse, my heirs, my personal representatives, my assignees, my children, and any guardian and item for said children. I understand and agree that by signing this waiver/release, I am assuming full responsibility for any and all risk of death or personal injury or property damage suffered by the child named above, while participating in any activity, including but not limited to health care expenses.

I understand and agree that I am signing this waiver/release on behalf of my minor child, that I will be giving up the same rights for said minor as I would be giving up if I had signed this document of my own behalf.

I UNDERSTAND THAT THIS IS A LEGAL DOCUMENT.

I acknowledge that I have read this waiver/release agreement and that I understand the words and language in it. I understand there are potential dangers incidental to participating in any activity and going to/from any activity. I execute it voluntarily and with full knowledge of its meaning and significance.

The health history on the reverse of this form is correct so far as I know, and the herein described has permission to engage in all prescribed activities, except as noted by me and the physician. In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by and the adult leader in charge, to hospitalize, secure proper anesthesia, or to order injections or surgery for the reverse side named member.

Boys & Girls Club Hours for Members: Monday – Friday 2:30 p.m. to 6:00 p.m. *(During the School Year)*

Early & Late Fee Policy: There will be a \$1.00 fee per minute that your child is left in the Boys & Girls Club before or after the hours of operation. Children will not be allowed back in until the fee has been paid.

The Boys & Girls Club would like every member to have a positive day. Members will be held accountable for their actions to ensure a safe and fun environment for all

I give my permission to The Salvation Army Boys & Girls Club of Conway/Horry to share information about my child listed on this application with the Boys & Girls Clubs of America (BGCA) for research purposes and/or to evaluate the program's effectiveness. Information 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 any other information collected by the Boys & Girls Club, including but not limited to data collected via surveys or questionnaires. All information provided to BGCA will be kept confidential.

As a member of The Salvation Army Boys & Girls Club of Conway/Horry, your child will have access to the Internet. While precautions are taken, it is possible s/he may access inappropriate sites. The Salvation Army Boys & Girls Club of Conway/Horry has rules and consequences for such behavior; however we will not be responsible for the consequences of such access. Your child's signature below indicates that they understand and agree to abide by the Club Member Technology Rules & Regulations.

Among the many services available during our after-school program, we provide a wide variety of homework help and academic support programs. In order for us to assess and monitor the academic needs of our members and provide appropriate tutoring and academic services, The Salvation Army Boys & Girls Club of Conway/Horry would like to collect the report cards for your child in addition to having them participate in a diagnostic online survey. This release is valid for one year and may be revoked at any time by contacting the The Salvation Army Boys & Girls Club of Conway/Horry in writing.

I hereby consent and authorize The Salvation Army to use and reproduce photographs taken of my child for publicity, advertising and marketing purposes of every description. Please check this box if you do not consent to this release.

I hereby consent and authorize The Salvation Army Boys & Girls Club of Conway/Horry to survey my child about their Club experience, behaviors, skills and attitudes using a variety of survey instruments.

Member has permission to utilize the transportation offered: Yes No

Member may participate in all Club activities in or adjacent to the Club building: Yes No

Member must wear closed toed shoes in all Club activities unless specified otherwise.

Please do not send toys, CD players, MP3 players, jewelry, cell phones, handheld games or other valuables to the Club. I understand the Boys & Girls Club is not responsible for lost or stolen items.

Parent / Guardian Signature: _____ Date: _____

Member Signature: _____ Date: _____