



**BOYS & GIRLS CLUBS**  
OF MANATEE COUNTY

**2018 – 2019**

Renewing Member: \_\_\_\_\_ New Member: \_\_\_\_\_

BGCMC ID # \_\_\_\_\_

Club: \_\_\_\_\_

After School: \_\_\_\_\_ Teen Extended Nights: \_\_\_\_\_ Both: \_\_\_\_\_

All sections of the application must be complete. Please print clearly and use a ✓ to select choice when possible.

**General Information**

|                         |  |  |  |  |  |
|-------------------------|--|--|--|--|--|
| First Name              |  | Last Name                                  |  | Mid. Initial   |  |
| Physical Street Address |  |  |  |  |  |
| City                    |  | State                                      |  | Zip  |  |
| Gender                  | <input type="checkbox"/> Male<br><input type="checkbox"/> Female | Birth Date                                 | Age  | Phone #  | T-Shirt Size<br>Child: S M L<br>Adult: S M L XL 2X |
| School                  |  | Student ID #                               |  | Grade  |  |
| Race:                   | <input type="checkbox"/> Black - African American                | <input type="checkbox"/> Hispanic / Latino | <input type="checkbox"/> White – Caucasian |  |  |
|                         | <input type="checkbox"/> Native Hawaiian / Pacific Islander      | <input type="checkbox"/> Haitian           | <input type="checkbox"/> Asian American    |  |  |
|                         | <input type="checkbox"/> American Indian or Alaskan Native       | <input type="checkbox"/> 2 or More Races   | <input type="checkbox"/> Other             |  |  |
| Household Income        |  | Estimated household income in 2018?        |  | Ethnicity<br><input type="checkbox"/> Non-Hispanic<br><br><input type="checkbox"/> Hispanic  |  |
|                         |  |  |  | A. Less than: \$28,150 _____<br>B. \$28,151 - \$35,150 _____<br>C. \$35,151 - \$46,400 _____<br>D. \$46,401 - \$60,000 _____<br>E. \$60,001 - \$70,000 _____<br>F. Above: \$70,000 _____ |  |

**Parent / Guardian Contact Information / Authorized to Pick Up Member**

|                                 |                            |                             |
|---------------------------------|----------------------------|-----------------------------|
| Person # 1<br>Head of Household | First Name                 | Last Name                   |
|                                 | Relationship to Member     | Primary Phone #             |
|                                 | E-Mail Address             | Secondary Phone #           |
|                                 | Place of Employment (Name) | Location of Employer (City) |
| Person # 2                      | First Name                 | Last Name                   |
|                                 | Relationship to Member     | Primary Phone #             |
|                                 | E-Mail Address             | Secondary Phone #           |
|                                 | Place of Employment (Name) | Location of Employer (City) |

## Member Information

Previously a member of the Boys & Girls Clubs:    Yes    or    No        Which Club: \_\_\_\_\_

Member will leave at the End of the Day as :    Car Rider \_\_\_\_\_    Bike Rider \_\_\_\_\_    Walker \_\_\_\_\_    Bus (if available) \_\_\_\_\_

**The following information is necessary for our records and the funding our organization receives.  
The answers you provide are completely confidential. Your cooperation in providing this information is both appreciated and necessary. If you are requesting a scholarship you must answer YES to at least one of the following questions. \***

|   |     |    |
|---|-----|----|
| My child has been involved in the foster care system.   | Yes | No |
| My child has been involved with the juvenile justice system.  | Yes | No |
| My child has friends or family members that have been involved in criminal behavior or gang associations. | Yes | No |
| My child would be home after school without adult supervision if not attending the Boys & Girls Club.     | Yes | No |
| My child has been suspended from school or truant from school.  | Yes | No |
| My child has excessive absences from school.  | Yes | No |
| My child is currently functioning below the appropriate grade level for their age.                        | Yes | No |
| My child has a learning disability.   | Yes | No |
| My child currently has a day care voucher through the Early Learning Coalition.                           | Yes | No |
| My child is currently on the Free or Reduced Lunch Program.   | Yes | No |

## Health & Emergency Information

|  |             |              |               |
|--|-------------|--------------|---------------|
| <b>Primary<br/>Emergency<br/>Contact</b>   | First Name  | Last Name    | Phone         |
| <b>Secondary<br/>Emergency<br/>Contact</b> | First Name  | Last Name    | Phone         |
| <b>Physician</b>                           | First Name  | Last Name    | Phone         |
| <b>Preferred<br/>Clinic /<br/>Hospital</b> | Clinic Name | Clinic Phone | Hospital Name |

List All Medical Problems, Warnings, Allergies and Special Needs

List All Medications

### General Information

How many people typically live in your household? \_\_\_\_\_

List the names of any siblings who also attend the Boys & Girls Clubs of Manatee County.

|  |  |                         |                |
|--|--|-------------------------|----------------|
| <b>Family Setting Member Lives With:</b>   | Both Parents: _____ One Parent: _____ Other: _____ |                         |                |
| <b>Family Setting Member Lives with:</b>   | Both Parents _____                                 | Aunt _____              | Brother _____  |
|  | Mother _____                                       | Uncle _____             | Sister _____   |
|  | Father _____                                       | Grandparent _____       | Guardian _____ |
| <b>Military Service Parent or Guardian</b> | Not Applicable _____                               | Currently Serving _____ | Veteran _____  |
|  | Service Branch: _____                              |                         |                |

### Additional Persons Authorized to Pick Up Member

|          |            |                   |                    |
|----------|------------|-------------------|--------------------|
| <b>1</b> | First Name | Last Name         | Relation to Member |
|          | Phone #    | Secondary phone # |                    |
| <b>2</b> | First Name | Last Name         | Relation to Member |
|          | Phone #    | Secondary phone # |                    |
| <b>3</b> | First Name | Last Name         | Relation to Member |
|          | Phone #    | Secondary phone # |                    |

Notes / Other Information to Share



Club \_\_\_\_\_

**Member Information**

**First Name**

**Last Name**

**Mid. Initial**

**Consent & Acknowledgments**

**Emergency Treatment**

**Initials** \_\_\_\_\_

In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by the Boys & Girls Clubs to hospitalize, secure proper treatment for and to order injection, anesthesia, or surgery for my child as named above.

**Transportation & Field Trips**

**Initials** \_\_\_\_\_

I give permission for my child to utilize the after school bus transportation (if applicable) provided by the Boys & Girls Clubs and to participate in all field trips provided / sponsored by the Boys & Girls Clubs of Manatee County.

**Late Pick Up Fees**

**Initials** \_\_\_\_\_

I understand that my child must be picked up by closing time or a fee may be charged.

**Sick Child**

**Initials** \_\_\_\_\_

I understand that when my child is sick (as example; fever of 100 degrees and above, vomiting, diarrhea or other signs that medical treatment is needed) they are not to attend the club. If a child did not attend school for the day, they are not permitted to attend Club. Parents / Guardians are expected to pick up your child within one hour of being notified by the club that your child is ill.

**Participation in Technology / Electronic Information**

**Initials** \_\_\_\_\_

I give permission for my child to access the electronic information resources of the Boys & Girls Clubs of Manatee County. I understand that my child will receive appropriate training and will then adhere to various policies such as; not sharing passwords, not posting personal information of themselves or others, not trespassing into others files, not downloading unauthorized materials or software, viewing inappropriate or unauthorized websites and not using the computer equipment to harm others or their work.

**Swimming / Aquatic Activities**

**Initials** \_\_\_\_\_

My child can execute the following water skills; able to swim 25 yards and able to tread water for one minute. Water related activities will be limited based on swimming ability and age.

**Participation in Prevention / Intervention Programs**

**Initials** \_\_\_\_\_

The Boys & Girls Clubs of Manatee County offers Prevention / Intervention Programs. These are prevention programs that encourage all members to make smart, positive, healthy choices in life. The programs strive for participants to; identify and resist peer and media pressure for involvement in negative behavior and understand the consequences of negative decision-making. Participants will gain understanding of the physical and social changes taking place in their lives, as well as improve decision-making skills, learn goal setting, problem solving and relationship building. I understand the purpose of these programs and give permission for my child to attend.

## Consent & Acknowledgments

### Photo Release

Initials \_\_\_\_\_

I give permission for the Boys & Girls Clubs of Manatee County to take photos/video of my child and then to use these for publicity purposes and to meet grant reporting requirements.

### School Records

Initials \_\_\_\_\_

I give permission to release to the Boys & Girls Clubs of Manatee County any school information such as: grades, behavior and any other school reports necessary to assist in their programming.

### Parent / Guardian Signature

I approve my child joining the Boys & Girls Club and agree not to hold the Boys & Girls Club, its Board of Directors, Officers, Staff or Volunteers responsible and/or liable, and hereby RELEASE INDEMNITY AND HOLD THEM HARMLESS from liability for losses of any personal property and for injuries or by accidents suffered by my child at a Club or in connection with membership, travel or participation, including any injury or loss caused by or claimed to be caused by the negligence, whether in whole or in part.

I understand that my child shall attend the Club an average of (3) days a week.

I give consent for all State and Federal funder agencies or funder personnel to review records for evaluation or monitoring purposes. In addition, I understand that agency records relating to the program may be public records under Chapter 119 F.S.

I understand that this program receives funding from Manatee County Government and that from time to time a County Representative may request access to any or all agency records relating to this program and / or the delivery of its services for the purposes of evaluating or monitoring the program or delivery of service. I understand that any records provided to the County shall become public records, may be subject to any applicable state or federal exemptions, and be inspected by third persons.

I ATTEST that the information provided is true and accurate. I am aware, if any information indicated above is found untrue, it could result in discontinued services or discontinued rate discounts.

\_\_\_\_\_  
Signature

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Please Print Your Name

**Boys & Girls Clubs of Manatee County  
Parent Survey  
2018**

| <b>Club Experience</b>  | <b>Very True</b> | <b>Sort of True</b> | <b>Not True</b> |
|---|------------------|---------------------|-----------------|
| I feel welcome at the Boys & Girls Club   |                  |                     |                 |
| Staff cares about what happens to my child  |                  |                     |                 |
| Staff listens to me   |                  |                     |                 |
| My child likes coming to the Club   |                  |                     |                 |
| My child has fun at the Club  |                  |                     |                 |
| My child is learning at the Club  |                  |                     |                 |
| My child has friends at the Club  |                  |                     |                 |
| My child is safe at the Club  |                  |                     |                 |
| My child has a sense of belonging to the Club   |                  |                     |                 |
| If not for the affordable rates, my child could not attend the Club                       |                  |                     |                 |
| If not for the free transportation, my child could not attend the Club<br>(If applicable) |                  |                     |                 |

| <b>Club Impact</b>  | <b>Very True</b> | <b>Sort of True</b> | <b>Not True</b> |
|---|------------------|---------------------|-----------------|
| The Club helps my child learn right from wrong                                      |                  |                     |                 |
| The Club helps my child do better in school   |                  |                     |                 |
| The Club helps my child stay away from dangerous things                             |                  |                     |                 |
| The Club helps my child stay physically active                                      |                  |                     |                 |
| The Club offers my child opportunities & experiences I would not be able to provide |                  |                     |                 |
| I am very satisfied with the Boys & Girls Club                                      |                  |                     |                 |
| I would recommend Boys & Girls Club to other parents                                |                  |                     |                 |

Survey Continued on Back

**What is the Most Important Lesson Your Child Should Learn at the Club**

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|--|
|  |
|--|

**What are We Doing Well**

**What Needs Improvement**

|  |
|--|
|  |
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**Thank You for Taking This Survey  
Your Responses Will Help Improve the Boys & Girls Clubs of Manatee County**