



BOYS & GIRLS CLUBS
OF GREATER CHARLOTTE

Club Member Name: _____ Membership #: _____

**The Boys & Girls Clubs of Greater Charlotte
2011-2012 Membership Application**

Please fill out the below information completely and accurately. If not applicable, please write N/A. Required fields are denoted with an asterisk (*).

HEAD OF HOUSEHOLD INFORMATION (Relationship to child: _____)

(Parent/Guardian) First Name: _____ Last Name: * _____ Gender: Male Female

Home Address: * _____

City _____ State _____ Zip _____

Phone Number 1: (____) _____ - _____ Phone Type: * Home Work Cell Other: _____

Phone Number 2: (____) _____ - _____ Phone Type: * Home Work Cell Other: _____

Phone Number 3: (____) _____ - _____ Phone Type: Home Work Cell Other: _____

E-mail Address: _____ E-mail type: Personal Work

Employer: _____ Job Title: _____

(If in military): Military Branch: _____ Status: _____ Start Date: _____ End Date: _____

Family Size: _____ Family Income (please check one) \$0-\$10,000 \$10,001-\$20,000 \$20,001-\$30,000 \$30,001-\$40,000
 \$40,001-\$50,000 \$50,001-\$60,000 \$60,001-\$70,000 \$70,001-\$80,000
 \$80,001-\$90,000+

OTHER PARENT/GUARDIAN INFORMATION (Relationship to child: _____)

(Parent/Guardian) First Name: _____ Last Name: _____ Gender: Male Female

Home Address (if different from above): _____

City _____ State _____ Zip _____

Phone Number 1: (____) _____ - _____ Phone Type: Home Work Cell Other: _____

Phone Number 2: (____) _____ - _____ Phone Type: Home Work Cell Other: _____

Phone Number 3: (____) _____ - _____ Phone Type: Home Work Cell Other: _____

E-mail Address: _____ E-mail type: Personal Work

Employer: _____ Job Title: _____

(If in military): Military Branch: _____ Status: _____ Start Date: _____ End Date: _____

TWO OTHER PEOPLE AUTHORIZED TO PICK UP CHILD/EMERGENCY CONTACTS:

Name: _____ Phone Number 1: _____ Phone Number 2: _____ Relationship to Child: _____

Name: _____ Phone Number 1: _____ Phone Number 2: _____ Relationship to Child: _____

MEMBER INFORMATION

(Child's) First Name: * _____ Middle Name: _____ Last Name: * _____

Nick Name (name child prefers to be called): _____ Birth date: * ____/____/____ Age: _____

Gender: Male Female Ethnicity (check one) Asian Black/African American Hispanic/Latino Other
 Multi-Racial Native American White/Caucasian

School: _____ Grade: _____ Teacher(s) name: _____

Household Type (Check which best describes with whom child live) Both Parents Single Parent-Mother Only Single Parent-Father Only
 Both Grandparents Grandmother Only Grandfather Only
 Foster Parent Group Home Provider Other

Is this child involved in any custody issues? No Yes (if yes, please explain briefly): _____

Does this child live in public housing? No Yes This child receives: free lunch reduced lunch neither

I am the parent/guardian of the minor _____, and I am signing this application on behalf of said minor.

Parent/Guardian Signature: * _____ Date: * _____ Printed Name of Parent/Guardian: * _____



The Salvation Army Boys & Girls Clubs
Membership Application (One Name Per Application)

Name of Child or Youth Participant (please print) _____

Parent(s) and/or legal guardian(s) of child participant _____

Address _____

Home Phone (_____) _____ Work Phone (_____) _____

Age of Child _____ Birth Date _____

Race _____ Sex _____

Academic Grade as of September 2011 _____

Current School _____

Parent or Guardian Information:

Mother's Name: _____ Name of Employer: _____

Cellular Number: _____ Work Phone: _____

Father's Name: _____ Name of Employer: _____

Cellular Number: _____ Work Phone: _____

Release of Children/Youth After Program Activities:

When program activities have concluded, my child may be released into the care of:

- Only the parent or guardian designated on this form
The parent/guardian or the following individuals (please list names):

- 1. _____ Phone: _____ Relationship: _____
2. _____ Phone: _____ Relationship: _____
3. _____ Phone: _____ Relationship: _____

Parent/Guardian Release

I am the parent or legal guardian of the minor _____, and I am signing this waiver/release on behalf of said minor.

Signature of Parent or Legal Guardian _____ Date _____

Print Name of Parent or Legal Guardian _____ Age of Minor _____

Witness Signature _____ Date _____



Name of Child or Youth Participant (please print) _____

Parent(s) and/or legal guardian(s) of child participant _____

Activity Responsibility Agreement

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 by signing this waiver/release, I am agreeing to release The Salvation Army, its officers, agents or employees harmless from any and all liability or costs, including attorney fees, associated with or arising from my participation in any Activity.
- 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.

Signature of Parent or Legal Guardian

Date

Print Name of Parent or Legal Guardian Age of Minor



Name of Child or Youth Participant (please print) _____

Parent(s) and/or legal guardian(s) of child participant _____

Special Events and Field Trips

I understand that the child named above will be participating in Boys & Girls Club Activities from January 1st, 2011 until December 31, 2011. I understand that during this period my child/youth may take part in activities such as: games, sports, fieldtrips, and other activities consistent with the purposes of the unit/program.

I agree that my child/youth can be transported in a Salvation Army Boys & Girls Club vehicle to and from school and any Club Activity.

First Aid and Emergency Medical Treatment

I recognize that there may be occasions where the child named above or I, if I am a participant, may be in need of first aid or emergency medical treatment as a result of an accident, illness, or other health condition or injury I do hereby give permission for agents of The Salvation Army to seek and secure any needed medical attention or treatment for the child named above or me, if I am a participant, including hospitalization if in the agent's opinion such need arises. In doing so, I agree to pay all fees and costs arising from this action to obtain medical treatment.

I give permission for attending physician(s) and other medical personnel to administer any needed medical treatment, including surgery and, again; I agree to pay for the medical treatment.

Medical History

Special medical needs or concerns (allergies, conditions, dietary needs, medications, etc.):

Health Insurance Information

Insurance Company: _____

Policy Number: _____

Phone Number: _____

Medical Doctor: _____

Emergency Contacts

Names of persons and telephone numbers to call in case of emergency:

- 1. Name: _____ Phone Number: _____
- 2. Name: _____ Phone Number: _____
- 3. Name: _____ Phone Number: _____

Swimming Ability

- Non-swimmer
- Beginner (capable of swimming for several minutes in deep water)
- Moderate (capable of swimming several lengths of pool)
- Advanced (capable of swimming long distances)

Other Information

Other information leaders should know about the child or adult participant: _____

Signature of Parent or Legal Guardian

Date

Print Name of Parent or Legal Guardian

THE CLUB

Name of Child or Youth Participant (please print) _____

Parent(s) and/or legal guardian(s) of child participant _____

Consent to Publication by The Salvation Army

I certify that I am at least 21 years of age, and the legal parent or guardian of the child named above. I hereby grant to The Salvation Army, its successors and assigns, its agents and those by whom it is commissioned, the absolute, unrestricted and unlimited license, right, permission, and consent to use and reuse, disseminate, copyright, print, reproduce, publish and republish, for any and all trade purposes or commercial or other advertising or public purposes, and in any and all advertising, publicity, display, publication or media, my child's name, signature and likeness, and any portraits, pictures, photographic prints or other representations of my child, or in which my child may appear, or any reproductions or sketches thereof or parts thereof, photographic or otherwise, with such additions, deletions, alterations or changes therein as you in your discretion may make, either separately or together with my child's name or a fictitious name, or the name of another person, with or without any statements or testimonials made by my child, or authorized by me which you may, in your discretion, prepare for use in connection therewith. I warrant that I have not limited or restricted the use of my child's name or photograph to the use of any organization or person. I hereby grant unrestricted use of audio tracks or text by The Salvation Army for such purposes as The Salvation Army may deem appropriate.

I hereby release and discharge The Salvation Army, its successors, assigns and agents from any and all claims and demands arising out of or in connection with the use of any of the foregoing, including any claims for defamation, invasion of privacy or violation of any statutory right.

Authorization Relating To A Minor or Individual Under Local Guardianship

I hereby certify that I am the (parent)/(legal guardian) of a minor child or dependent

_____, and have executed this release on
Child/Youth Name

Signature of Parent or Legal Guardian

Date

THE CLUB

CODE OF CONDUCT

1. This is my home away from home, I will treat it with respect, and I will keep it clean.
2. I will respect my fellow club members.
3. I will strive to keep my mind, body, and language clean.
 - (a) I will develop my mind so as to control my thoughts and actions.
 - (b) I will develop my body to keep it clean and healthy.
 - (c) I will develop my language, as it tells others what I am.
4. In my club I will be fully clothed.
 - (a) I will not wear a hat in my club.
 - (b) I will not wear swimsuits or short shorts in the program area.
 - (c) My coat or sweater and other personal belongings will be put in the proper place.
5. Our game room equipment will be used with respect.
 - (a) I will not sit on any tables.
 - (d) I will not allow any equipment to be mistreated.
6. My conduct shows what kind of person I am.
 - (a) I will not run in my club.
 - (b) I will not smoke in my club.
 - (c) I will not fight in my club.
 - (d) I will not gamble in my club.
 - (e) I will not take part in, or allow horseplay in my club.
7. When traveling, as a club representative, I will be well dressed and well behaved.
8. If I do not respect my club I know I will be suspended.
9. Above all I will respect and obey my club staff.
10. When visiting other clubs/community centers, I will always conform to the "CODE OF CONDUCT" established by the local club/community center.

CLUB MEMBER SIGNATURE _____

PARENT SIGNATURE _____

Date: _____

THE CLUB

Acceptable Use of Internet and Other Electronic Resources

The Salvation Army recognizes the value of computer and other electronic resources to improve learning and enhance the administration and operation of its programs. To this end, the Divisional Finance Board encourages the responsible use of computers; computer networks, including the Internet; and other electronic resources in support of the mission and goals of The Salvation Army. Because the Internet is an unregulated, worldwide vehicle for communication, information available to individuals is impossible to control. Therefore, the Divisional Finance Board adopts this policy governing the voluntary use of electronic resources and the Internet in order to provide guidance to individuals and groups obtaining access to these resources on The Salvation Army-owned equipment or through The Salvation Army-affiliated organizations.

The Salvation Army Rights and Responsibilities

It is the policy of The Salvation Army to maintain an environment that promotes ethical and responsible conduct in all online network activities by individuals. It shall be a violation of this policy for any individual to engage in any that does not conform to the established purpose and general rules and policies of the network. Within this general policy, The Salvation Army recognizes its legal and moral obligation to protect the well-being of individuals in its charge. To this end, The Salvation Army retains the following rights and recognizes the following obligations:

1. To log network use and to monitor fileserver space utilization by users, and assume no responsibility or liability for files deleted due to violation of fileserver space allotments.
2. To remove a user account on the network.
3. To monitor the use of online activities. This may include real-time monitoring of network and/or maintaining a log of Internet for later review.
4. To provide internal and external controls as appropriate and feasible. Such controls shall include the right to determine who will have access to The Salvation Army-owned equipment and, specifically, to exclude those who do not abide by The Salvation Army's acceptable use policy or other policies governing the use of facilities, equipment, and materials. The Salvation Army reserves the right to restrict online destinations through software or other means.
5. To provide guidelines and make reasonable efforts to train staff and computer users in acceptable use and policies governing online communications.

Staff Responsibilities

1. Staff members who supervise users, control electronic equipment, or otherwise have occasion to observe user use of said equipment online shall make reasonable efforts to monitor the use of this equipment to assure that it conforms to the mission and goals of The Salvation Army.
2. Staff should make reasonable efforts to become familiar with the Internet and its use so that effective monitoring, instruction, and assistance may be achieved.

User Responsibilities

Use of the electronic media provided by The Salvation Army is a privilege that offers a wealth of information and resources for research. Where it is available, this resource is offered to individuals at no cost. In order to maintain the privilege, users agree to learn and comply with all of the provisions of this policy.

Acceptable Use

1. All use of the Internet must be consistent with the mission and objectives of The Salvation Army.
2. Proper codes of conduct in electronic communication must be used. In news groups, giving out personal information is inappropriate. When using e-mail, extreme caution must always be taken in revealing any information of a personal nature.
3. Network accounts are to be used only by the authorized owner of the account for the authorized purpose.
4. All communications and information accessible via the network should be assumed to be private property.
5. Subscriptions to mailing lists and bulletin boards must be reported to the system administrator. Prior approval for such subscriptions is required for all users.
6. Mailing list subscriptions will be monitored and maintained, and files will be deleted from the personal mail directories to avoid excessive use of fileserver hard-disk space.
7. Exhibit exemplary behavior on the network as a representative of The Salvation Army and your community. Be polite!
8. From time to time, The Salvation Army will make determinations on whether specific uses of the network are consistent with the acceptable use practice.

Unacceptable Use

1. Giving out personal information about another person, including home address or phone number, is strictly prohibited.
2. Any use of the network for commercial or for-profit purposes is prohibited.
3. Excessive use of the network for personal business shall be cause for disciplinary action.

4. Any use of the network for product advertisement or political lobbying is prohibited.
5. Users shall not intentionally seek information on, obtain copies of, or modify files, other data, or passwords belonging to other users, or misrepresent other users on the network.
6. No use of the network shall serve to disrupt the use of the network by others. Hardware and/or software shall not be destroyed, modified, or abused in any way.
7. Malicious use of the network to develop programs that harass other users or infiltrate a computer or computing system and/or damage the software components of a computer or computing system is prohibited.
8. Hate mail, chain letters, harassment, discriminatory remarks, and other antisocial behaviors are prohibited on the network.
9. The unauthorized installation of any software, including shareware and freeware, for use on The Salvation Army computers is prohibited.
10. Use of the network to access or process pornographic material, inappropriate text files (as determined by the system administrator), or files dangerous to the integrity of the local area network is prohibited.
11. The Salvation Army network may not be used for downloading entertainment software or other files not related to the mission and objectives of The Salvation Army for transfer to a user's home computer or other personal computer. This prohibition pertains to freeware, shareware, copyrighted commercial and noncommercial software, and all other forms of software and files not directly related to the instructional and administrative purposes of The Salvation Army.
12. Downloading, copying, otherwise duplicating, and/or distributing copyrighted materials without the specific written permission of the copyright owner is prohibited, except that duplication and/or distribution of materials for educational purposes is permitted when such duplication and/or distribution would fall within the Fair Use Doctrine of the United States Copyright Law (Title 17, USC).
13. Use of the network for any unlawful purpose is prohibited.
14. Use of profanity, obscenity, racist terms, or other language that may be offensive to another user is prohibited.
15. Playing games is prohibited unless specifically authorized by staff.
16. Establishing network or Internet connections to live communications, including voice and/or video (relay Chat), is prohibited unless specifically authorized by the system administrator.

Disclaimer

1. The Salvation Army cannot be held accountable for the information that is retrieved via the network.
2. Pursuant to the Electronic Communications Privacy Act of 1986 (18 USC 2510 et seq.), notice is hereby given that there are no facilities provided by this system for sending or receiving private or confidential electronic communications. System administrators have access to all mail and messages are susceptible to monitoring. Messages relating to or in support of illegal activities will be reported to the appropriate authorities.
3. The Salvation Army will not be responsible for any damages you may suffer, including loss of data resulting from delays, non-deliveries, or service interruptions caused by our own negligence or your errors or omissions. Use of any information obtained is at your own risk.
4. The Salvation Army makes no warranties (expressed or implied) with respect to:
 - a. The content of any advice or information received by a user, or any costs or charges incurred as a result of seeing or accepting any information;
 - b. Any costs, liability, or damages caused by the way the user chooses to use his or her access to the network.
5. The Salvation Army reserves the right to change its policies and rules at any time.

Mission Statement

The Salvation Army, an international movement, is an evangelical part of the universal Christian church. Its message is based on the Bible. Its ministry is motivated by the love of God. Its mission is to preach the gospel of Jesus Christ and to meet human needs in His name without discrimination.

Acknowledgement of Understanding

I have read and agree to comply with the terms of this policy governing the use of The Salvation Army's Internet and other electronic resources. I understand that violation of this policy may result in disciplinary action, including possible revocation of membership, termination and civil and criminal penalties.

Applicant's Printed Name

Guardian's Printed Name
(required for applicants under 18)

_____/_____/20_____
Applicant's Signature and Date
(required for applicants under 18)

_____/_____/20_____
Guardian's Signature and Date

The Salvation Army Signatory's
Printed Name
_____/_____/20_____
The Salvation Army Signatory's
Signature and Date



SMART MOVES

Parents/Guardians Notice and Consent Form

Your child has expressed and interest in participating in Boys & Girls Club’s SMART Moves program SMART Moves is Boys & Girls Clubs of America’s nationally acclaimed prevention program educating youths about alcohol, tobacco, other drugs, teen sexual involvement and HIV/AIDS. Please keep in mind that our programs do the following:

- Only discusses topics that are relevant to your child’s stage of development. For example, we will not discuss the risks of early sexual involvement with 7-year –olds.
• Only teaches the facts about alcohol, tobacco and other drugs and the risks of teen sexual involvement and HIV/AIDS. We do not discuss our personal theories or beliefs.
• Teaches kids how to avoid negative peer pressure (refusal skills training).
• Does not advocate birth control or talk about abortion.

In addition, because of grant funding requirements for the SMART Moves program, it may be necessary that we administer pre-and post-tests, an anonymous questionnaire about a child’s personal background, and in some cases, keep progress notes on participants. These items may be necessary in order for our funding sources to evaluate the success of our program. Naturally, all of the above information will be kept strictly confidential.

If you have any questions about the SMART Moves curriculum and how your child will be involved, please attend our SMART Moves program orientation for parents/community members, scheduled for

_____ at _____. If you have any questions, suggestions or concerns, please contact _____ at _____

_____ I DO give permission for my child to participate in the SMART Moves program.

_____ I DO NOT give my permission for my child to participate in the SMART Moves program.

Note: It is vital that your child return this letter in order to participate in the program.

Form with fields for Child’s Name, Age, Boys & Girls Club (or Program Site), Your Name Printed, Your Signature, and Date.



RELEASE OF INFORMATION CONSENT FORM

STUDENT _____
DATE OF BIRTH _____
SCHOOL _____
GRADE _____
HOMEROOM TEACHER _____

Agencies/Schools exchanging information

Four sets of horizontal lines for listing agencies or schools.

I, _____ hereby authorize the
(Specify, if name of parent(s) or legal guardian)

above named facilities to exchange specified information concerning the above named child.

This data shall include observations of the child in school, teacher, counselor, and principal interviews, psychological of other exceptional data, and/or a review of the cumulative folder.

The purpose of exchanging this data shall be for educational assessment and /or evaluation diagnostic/therapeutic treatment, and/or behavioral purposes only.

I understand that I may revoke this consent at any time except to the extent that action based on this consent has been taken. This consent will expire automatically one year from the date recorded below. All legal confidentiality guidelines will be followed.

This authorization is understood and is made voluntarily on my part.

Signed: _____

Parent/Guardian (Circle One)

Witness: _____

Date: _____