School Year Day Camps 2022-23

The Boys & Girls Clubs of Greater San Diego – **Mollenkopf Family Branch** in 4S Ranch off School Year Day Camps during school breaks. Each camp has fantastic themed activities, events, and often times field trips. Join us at the Club during break!

<table>
<thead>
<tr>
<th>Dates</th>
<th>Cost</th>
<th>Camp Time</th>
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<tbody>
<tr>
<td>November 21–23</td>
<td>$111</td>
<td>7:30am–5:30pm</td>
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<tr>
<td>December 19–23</td>
<td>$185</td>
<td>7:30am–5:30pm</td>
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<tr>
<td>February 20-24</td>
<td>$185</td>
<td>7:30am–5:30pm</td>
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<tr>
<td>April 10-14</td>
<td>$185</td>
<td>7:30am–5:30pm</td>
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*22-23 BGC Membership required $60 (expires June 30, 2023) if a new member

**No camp offered December 26-30 (BGC Closed)

*** Email tparry@sdyouth.org if you wish to apply for a scholarship

Membership fee waiver may be available for active Military, please ask for form.

- Space is limited; Priority registration is open to current after school members first
- Members may be dropped off as early as 7:30am.
- Members must be picked up by 5:30pm
- Payment must be received prior to the Wednesday before the first day of camp
- Payments will be processed the Wednesday or Thursday prior to the week of camp
- Refunds will be given if request is made before the Wednesday prior to the week of camp
- No partial refunds for not fully attending, including removal from program due to disciplinary reasons and/or sickness.
- Must register and pay for the full week of camp; no part-time fee
- Payments made by credit card or cash for camps (no checks will be accepted)
- If paying in person please come by the club M-F between 12-6pm
School Year Day Camp Expectations & Parent Agreement

Day Camp hours are Monday-Friday, 7:30 a.m. to 5:30 p.m. For a full listing of Boys & Girls Clubs of Greater San Diego policies and guidelines, please consult the Parent Handbook. You can obtain a copy from the Club or online at www.sdyouth.org. Please read through and initial the following:

☐ Please instruct your child that he/she should not leave the building unless accompanied by an adult staff member. This rule will also be stressed and reinforced by Boys & Girls Club staff.

☐ Please be prepared to show your I.D. at all times. Anyone picking up a Club Member must provide identification to the front desk at the time of pick up.

☐ Club hours are 7:30 a.m. to 5:30 p.m. Please make the necessary arrangements to have your child/children picked-up no later than 5:30 p.m. Any pick-up after 5:30 p.m. is considered a late pick-up. After 3 late pick-ups, your child/children will be dropped from the program.

☐ Children must bring their own lunch & snack but we do not have bowls, plates or the ability to cook lunches.

☐ The Club is not responsible for lost or stolen items. All belongings, especially swimsuits and towels, should be taken home every day. Lost and Found is held for a period of one week and then donated to a charitable organization. This includes cell phones or any electronic device. – Please leave all valuables at home! Children are allowed to have cell phones with them but are expected to remain engaged in the programming offered. They may respond to a parent’s call or text, but otherwise are not to be on phones or any type of electronics while at the Boys & Girls Club. As a reminder, the Club is not responsible for lost or stolen phones or other valuables.

☐ All Club Members are expected to follow all rules for the safety of themselves and others. Failure to follow the rules at off-site trips will result in removal from future trips.

☐ To ensure the safety of all participants, the Club will not serve children whose behavior is likely to result in injury to themselves or others, who are at risk to leave the premises without permission, whose disability is so severe they cannot participate in a majority of Club activities, who require assistance to use the toilet or who require a personal aide while attending school and whose aide does not accompany them at all times to the Club.

☐ All payments are due by the Wednesday 5pm prior to the of camp

☐ Anyone coming to pick up your child must have an ID/Driver’s License and be listed on the approved pick-up list.

☐ Parents may not drop off or pick up members from any field trip.

☐ It is the responsibility of the parent to read through the parent handbook.

☐ All parents, guardians, family members will be respectful to all staff, children, and volunteers. Aggressive and disrespectful behavior will result in removal from the program. All concerns will be addressed to the Branch Manager.

☐ We consider our programs to be a partnership between the families and Club staff. We will do what is necessary to make this successful for you and your child/children. We ask that all parents, guardians and family members please show respect to our staff, volunteers and other members. Any aggressive or disrespectful behavior will not be tolerated and will be subject to removal from the programs.

By signing this, I have read, initialed, and signed each document and understand the expectations and policies at the Boys & Girls Clubs of Greater San Diego.

Parent/Guardian Name: ________________________________________

Parent/Guardian Signature: _____________________________________

Date: ___________________
2022-23 Credit Card Authorization Form

Child(ren)’s Information:

Last Name(s): ____________________  First Name(s): _______________________

I authorize the Boys & Girls Clubs of Greater San Diego to make recurring charges to my credit/debit card listed below and if necessary to initiate adjustments for any transactions credited or debited in error. This authority will remain in effect until the Boys & Girls Clubs of Greater San Diego has received written notification to cancel. Notice must be received by the Boys & Girls Clubs of Greater San Diego at least seven days prior to the recurring charge date in order to cancel the next payment:

Name as it appears on card: ___________________________________________

Type of card:  □ Visa  □ MC  □ Discover  □ AMEX  □ Use card on file
(only for current ASP members)

Card Number: ____________________________  Expiration: ____________

Billing Address: _______________________________________________________

City/State/Zip: ____________________________________________________________________

Phone Number: ____________________________

Please mark the box(es) on the week(s) you would like your child to attend. Please note you will only be charged for the weeks you indicate you would like to attend. You must notify the Membership Clerk by Tuesday 5pm if you will not be attending a week that is checked.

No refund will be given for cancelations requested after TUESDAY 5pm before the week that was charged.

Check the weeks you wish to attend.

<table>
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<tr>
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_______________________________________________________  ___________________________
Card Holder’s Signature  Date

Office Use Only  Sibling Discount  20%  Scholarship  30%  50%
2022-23 School Year Day Camp Field Trip Permission Slip

_________________________________________ has my permission to attend the events marked on the registration form. In the event that my child/children becomes ill or sustains injury while participating in the events listed, Club staff have my permission to administer first aid for their relief. If it is not practical or possible to return my child/children to me or receive instructions for their care, consent is given for admittance to a physician’s office or hospital to receive care from a licensed physician and/or surgeon that he/she deems necessary for the relief of pain and to preserve their life or health.

Parent/ Guardian Signature ____________________________

Home Phone & Work Phone ____________________________ Date ____________________________

Family Doctor, City ____________________________ Insurance Company & Policy # ____________________________ Doctor Phone ____________________________

Drug/Allergies/Medications: __________________________________________________________

EMERGENCY CONTACTS (other than listed above)... PLEASE GIVE TWO:

Name ____________________________ Home & Work Phone ____________________________ Relationship ____________________________

Name ____________________________ Home & Work Phone ____________________________ Relationship ____________________________

FIELD TRIP POLICY (Please initial below):

— All trip participants are required to follow trip guidelines at all times. The guidelines are as follows:
  o Must adhere to all staff directions and instructions.
  o Must remain with assigned group and staff member.
  o Must follow all safety rules and regulations on the bus and during the trip.
  o Must refrain from vulgar and obscene language and gestures.
— All trip participants are required to follow water safety rules at all times. The guidelines are as follows:
  o Please come prepared to swim in appropriate swim wear.
  o Flip flops or other sandals should be worn on the pool deck only.
  o Children who are unable to swim competently will be given a life vest to wear for the duration of the swim time. Please let the Branch Manager know ahead of time regarding your child’s swimming ability.
  o Children must be able to apply their own sunscreen or allow another member to assist. Staff are not allowed to apply sunscreen.
— Disobedient and rowdy behavior will not be tolerated. If a participant does not follow these rules, he/she will be prohibited from attending future trips.
— Members may not be picked up or dropped off at a field trip location. They can only be signed out at the Club site, according to Club policy.
— Participants must arrive at the Club on time so that they may be assigned a group and properly checked in. Check in times for each trip are listed at the Club. There will be no refunds or exchanges given on trips missed due to a late arrival.

I understand that by registering my child for trips that I am agreeing to the above stated terms and conditions.

_____________________________ ____________________________
Parent Name & Signature Date
MEMBERSHIP APPLICATION
Boys & Girls Clubs of Greater San Diego

First Name: ___________________ Middle: ___________________ Last: ___________________

Gender: □ M □ F School: ___________________ Grade: _______ Birth Date: ___________ Age: _______

Address: ________________________________________________________________________________

City: ___________________ State: ___________ Zip: ___________________ Phone: ___________________

Ethnic Background: □ Caucasian □ African Am □ Hispanic □ Asian □ Am Indian □ Other _______

Membership Status: □ New □ Renewal □ Transfer from another location: ___________

How did you hear about the Club? □ School Flyer □ Drive By □ BGC Website □ Friend ___________

Please Print Name

Medical Information:

Special Information: Allergies, etc. Does your child take any medications? __________

This information is for statistical purposes only and is used to help secure funding for the Club. Answers are confidential. Please answer all questions.

Member lives with: □ Mom & Dad □ Mom Only □ Dad Only □ Grandparent □ Other: ___________

Annual Household Income: ___________

Do you qualify for: _______ FREE Lunch _______ Reduced Lunch _______ Neither Number of Individuals Living in Household: ___________

Emergency Contacts:

Mother/Guardian: ___________________ Home #: ___________ Cell #: ___________

Company: ___________________ Phone #: ___________ Extension: ___________

E-mail address: ___________________

Father/Guardian: ___________________ Home #: ___________ Cell #: ___________

Company: ___________________ Phone #: ___________ Extension: ___________

E-mail address: ___________________

Additional contacts if parents/guardians cannot be reached: (Please indicate relationship to child.)

Name: ___________________ Phone #: ___________ Phone #: ___________

Name: ___________________ Phone #: ___________ Phone #: ___________

Authorized to pick up members from the Club:

Please note: Parents/guardians and additional contacts are automatically authorized to pick up children from the Club. Only list other people who may be picking up members.

Name: ___________________ Phone #: ___________________

Name: ___________________ Phone #: ___________________

Name: ___________________ Phone #: ___________________
Authorization to Leave Premises Unescorted:

☐ My child is 12 years or older and has my permission to check him/herself out of the Club.

☐ My child is 12 years or older but does not have my permission to check him/herself out of the Club.

Children younger than 12 years old may leave the Club with a relative so long as the relative is 12 years or older.

☐ My child is younger than 12 years old, but has my permission to leave the club with _______________ Age: __________

Relationship:          ☐ Brother          ☐ Sister          ☐ Cousin          ☐ Aunt/Uncle

I give consent for photographs in which my child may appear, to be used in any way the Club may care to use them.

I understand the Club has adopted a Safe Passage Policy that prohibits members from coming and going as they please. I understand that once a child has entered the building, they will not be allowed to leave until a parent/guardian/authorized adult arrives to retrieve them. I understand that the Club is not a licensed day care facility and that staff will not physically restrain children who insist on leaving without parent permission.

I have read and agree to abide by the policies stated in the Parent Handbook. I understand that failure to abide by the policies in the handbook may result in the removal of my child from Club programs.

I give permission for my child to participate in all Boys & Girls Clubs Programs. In consideration of said minor being permitted to enter any branch of the Boys & Girls Clubs of Greater San Diego (the “Club”) for observation, use of facilities and/or equipment or participation in any program, I hereby:

Acknowledge that (i) I have read this document, (ii) I have inspected the facilities and equipment, (iii) I accept them as being safe and reasonably suited for the purposes intended, and (iv) I voluntarily sign this document.

Release the Clubs, its directors, officers, employees, volunteers, governing board, agents, representatives (collectively “Releasees”) from all liability to me for any loss or damage to property or injury or death to person, whether caused by Releasees or by any person associated directly or indirectly with the Club, its officers, directors, employees or volunteers or otherwise while my child is in or near any Club branch or participating in any Club activity.

Agree not to sue Releasees for any loss, damage, injury or death described above and indemnify and hold harmless Releasees and each of them from any injury to persons or property sustained by any person caused by any act, neglect, default, or omission of the undersigned or of any person associated directly or indirectly by him upon or in connection with this activity or whether caused by the negligence of the Releasees or otherwise, whether the said injury or damage occurs upon or adjacent to the property. The undersigned at his own cost, expense and risk shall defend any and all actions, suits or other legal proceedings that may be brought or instituted against the Club on any such claim or demand, and pay or satisfy any judgment that may be rendered against the Club in any such action, suit or legal proceedings or result thereof.

I assume full responsibility for, and risk of, bodily injury, death or property damage due to the negligence of Releases or otherwise.

I do hereby authorize the Clubs as agent for the undersigned, to consent with respect to said minor, to any x-ray examination, anesthetic, medical, dental, or surgical diagnosis or treatment, and hospital care which is deemed advisable by, and is to be rendered under general or special supervision of, any physician and surgeon licensed under the provisions of the California Medical Practice Act on the medical staff of any hospital, whether such diagnosis or treatment is rendered at the office of the physician or at the hospital. I understand that the Club is not responsible for costs incurred for medical care.

I intend this document to be as broad and inclusive as is permitted by the laws of the state of California; if any portion hereof is held invalid, I agree that the balance shall continue in full force and effect.

Signature of Parent/Guardian: ___________________________________ Date: ____________________________

For Office Use Only: Membership #: __________Membership paid: __________Receipt #: __________New/Renewal Member: __________

Visions Entry Date: _____ Expiration Date: _____ Processed by: ______