



**BOYS & GIRLS CLUBS**  
OF IMPERIAL VALLEY

**Membership Application**

School year membership fee is **\$25 per child**. Summer Membership fee is **\$60 half day or \$100 full day**. **Family Fee \$75 per family (up to 3) half day (\$10 additional siblings) or \$125 full day (\$25 additional siblings)**. Members must be between the ages of 5yrs and in Kindergarten and 18yrs still in High School. Incomplete applications will **NOT** be processed.  
**\*Membership fees are non-refundable after 5 days of first attendance.**

Membership # \_\_\_\_\_

For Front Office Use Only:				
Registration	New or Renew		Summer: Half day or Full day	
Payment	Amount Received: \$ Cash   Check   Credit Card		Amount Received: \$ Cash   Check   Credit Card	
Received By	Date: / /			
Site Attending	Brawley Unit 760-344-3354	Teen Center 760-344-8040	Holtville Unit 760-756-3069	Transportation
Boys & Girls Clubs of Imperial Valley   P.O Box 1277, Brawley, Ca, 92227   760-344-3354 (Administrative office)				

**Member Information**

Name (Last): \_\_\_\_\_ (First): \_\_\_\_\_ (Middle): \_\_\_\_\_

Gender	Date of Birth	Ethnicity (Check All That Apply)	Grade Entering	School Name
M or F	/ /	<input type="checkbox"/> Caucasian <input type="checkbox"/> African American <input type="checkbox"/> Hispanic / Latino <input type="checkbox"/> Asian <input type="checkbox"/> American Indian / Alaska Native <input type="checkbox"/> Native Hawaiian / Other Pacific Islander <input type="checkbox"/> Multiracial <input type="checkbox"/> Other: _____		_____
				City: _____

Street Address: \_\_\_\_\_ Home Phone Number:(\_\_\_\_\_) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County:Imperial / Other: \_\_\_\_\_

Child's Age: \_\_\_\_\_ Family / Parent's Email: \_\_\_\_\_

**Parent / Guardian Information: (Primary Contact)**

Name: \_\_\_\_\_

Relationship to Member: \_\_\_\_\_

Lives in Same Household as Member? Yes No

Employer: \_\_\_\_\_

Work Address: \_\_\_\_\_

Work City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

**Parent / Guardian Information:**

Name: \_\_\_\_\_

Relationship to Member: \_\_\_\_\_

Lives in Same Household as Member? Yes No

Employer: \_\_\_\_\_

Work Address: \_\_\_\_\_

Work City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

**Emergency Contacts (other than parent / guardian & must be someone living in close proximity):**

Name: \_\_\_\_\_

Relationship to Member: \_\_\_\_\_

Lives in Same Household as Member? Yes No

Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Authorized to Pick Member Up? (Circle One): Y / N

Name: \_\_\_\_\_

Relationship to Member: \_\_\_\_\_

Lives in Same Household as Member? Yes No

Work Phone: (\_\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_\_) \_\_\_\_\_

Authorized to Pick Member Up? (Circle One): Y / N

**Please list below any additional contacts authorized to pick up member:**

Name:	Phone:	Relationship:
Name:	Phone:	Relationship:
Name:	Phone:	Relationship:
Name:	Phone:	Relationship:

It is the parent's responsibility to notify the front desk staff of any changes in address, contact information, or phone numbers.

**Medical Information:**

Doctor's Name: \_\_\_\_\_ Insurance Carrier: \_\_\_\_\_

Phone Number: (\_\_\_\_\_) \_\_\_\_\_ Policy #: \_\_\_\_\_ Group #: \_\_\_\_\_

Please check if any of the following may apply:  ADD/ADHD  Asthma  Allergies  Autism  Developmental Delay  Diabetes

If you checked any of the above, please provide details \_\_\_\_\_

Other medical or health issues: \_\_\_\_\_

Any medications currently taken \_\_\_\_\_

\*Specialized care or treatment must be reviewed and approved in advance to ensure the safety of the member.

Medication is the responsibility of the parent/s and family physician. Parents are urged, with the advice of your child's physician to work out a schedule of administering medicine at home, outside of the Club hours. Club staff is First-aid and CPR certified but is not qualified to administer medication to your child. The Club is willing to safeguard inhalers for asthmatics, but is not responsible for the replacement cost if lost or stolen.

The following is requested to support our non-profit grant writing/fund development efforts. All information will remain strictly confidential.

**Annual Gross Household Income:**

\$ \_\_\_\_\_

**OR Select A Range Below:**

- |  |  |
|--|--|
| <input type="checkbox"/> \$0 - \$10,000      | <input type="checkbox"/> \$50,001 - \$60,000 |
| <input type="checkbox"/> \$10,001 - \$20,000 | <input type="checkbox"/> \$60,001 - \$70,000 |
| <input type="checkbox"/> \$20,001 - \$30,000 | <input type="checkbox"/> \$70,001 - \$80,000 |
| <input type="checkbox"/> \$30,001 - \$40,000 | <input type="checkbox"/> \$80,001 - \$90,000 |
| <input type="checkbox"/> \$40,001 - \$50,000 | <input type="checkbox"/> Over \$90,000       |

**Does this member live with their:**

- 
- Mother
- 
- Stepmother
- 
- Father
- 
- Stepfather
- 
- 
- Grandparent
- 
- Foster Parent
- 
- Other: \_\_\_\_\_

Number of Brothers: \_\_\_\_\_ Ages: \_\_\_\_\_

Number of Sisters: \_\_\_\_\_ Ages: \_\_\_\_\_

Total Household Size: \_\_\_\_\_ Number Under 18: \_\_\_\_\_

Single Parent (circle) Yes / No Number Over 65: \_\_\_\_\_

Head of Household (circle): Male / Female / Both

**Military Affiliation:**

Active Military (circle):

No / Yes

Branch: \_\_\_\_\_

Lives on base (circle)

No / Yes

Other Military Affiliation: \_\_\_\_\_

\*Please bring military identification with you for verification.

**National School Lunch Program – Please check your child's most current school lunch eligibility status below**

\_\_\_ Free Lunch Program \_\_\_ Reduced Fee Lunch Program \_\_\_ Does Not Qualify (Full Fee.)

**Parent/ Guardians Please Read and Initial:****Parent Initial:**

I give permission to the Boys &amp; Girls Clubs of Imperial Valley to share information about the minor child listed on this application with the Boys &amp; Girls Clubs of America (BGCA) for research purposes and/or to evaluate the program's effectiveness. Information that will be 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 other information collected by the Boys &amp; Girls Clubs of Imperial Valley, including data surveys or questionnaires. All information provided to BGCA will be kept confidential.

I give my permission for my child's picture, moving pictures, or any other graphic depiction or likeness to be used by BGC of Imperial Valley - Brawley Unit, Holtville Unit, Teen Center, Boys &amp; Girls Clubs of America, and their affiliates in publicity materials.

Every effort is made to provide members with a safe, enjoyable, and memorable experience. I attest and verify that my child is physically able to participate in all activities offered at Boys & Girls Clubs of Imperial Valley. I understand that there are a variety of play areas at Boys & Girls Clubs of Imperial Valley including but not limited to park, playground, gym, swimming pool, learning center, technology center, and games room. I acknowledge that use of these various areas poses risks to my child, including the risk of sprains, bruises, broken bones and serious injury or death. I understand that my child will have access to all areas/activities of the facility and that any special requests for restrictions for my child must be addressed and approved by the Unit Director and Program Supervisor of the specific clubhouse.

I, the parent/guardian of the minor child listed on this application, for ourselves, our heirs, executors and administrators, hereby release, waive, acquit and forever discharge Boys & Girls Clubs of Imperial Valley – or any other person or entity associated with any of the above organizations such as staff, directors, Board Members or volunteers, from all liability, claims, demands, or causes of action for any and all loss, damage, injury or death and any claim of damages resulting from use of facilities owned or controlled by the above organizations or participation in activities of said organizations either at or away from the Club. I give permission to BGC of Imperial Valley to seek emergency medical treatment for my minor child if I cannot be reached. I will be responsible for any and all costs of medical attention and treatment.

*I have read the complete application and I understand the rules and the conditions of membership of BGC of Imperial Valley as presented in attached form. By signing below, I agree to these policies and conditions and request that my child be admitted into the Club as a member.*

\_\_\_\_\_  
Parent's Name\_\_\_\_\_  
Parent's Signature\_\_\_\_\_  
Date

## Conditions of Membership

Parents/ Guardians please read the following and sign below:

Parent  
Initials

### Club Policies

- \_\_\_\_\_ Our Clubhouses are not, nor do they claim to be, a licensed daycare. Each Club is an OPEN DOOR facility. It is the parent or guardian's responsibility to instruct their child whether or not the child can leave their Club and when and with whom they may leave.
- \_\_\_\_\_ Late pick-ups cannot be accommodated and will result in removal from the program.
- \_\_\_\_\_ All fees must be paid as stated in the Program Fees Agreement. Failure to pay fees will result in termination of membership. There are no refunds for field trip or program fees, including pre-payments or any payments made in advance.
- \_\_\_\_\_ Parents must follow Club pick-up and drop-off procedures as stated in the Club's current Member Health & Safety Policy.
- \_\_\_\_\_ Parents must participate in an orientation and sign a Member Health & Safety Policy before their child can begin in the program.
- \_\_\_\_\_ Your child's membership is contingent on them following the rules stated below.

### Rules of Conduct

Member  
Initials

**As a member of Boys & Girls Clubs of Imperial Valley, I understand that I:** Must treat all staff, Club volunteers, and Club visitors with respect and follow all directions.

- \_\_\_\_\_ Must stay within the designated boundaries.
- \_\_\_\_\_ Must follow all safety rules, including wearing masks, washing hands, and following social distancing protocols.
- \_\_\_\_\_ Will not bring toys or personal items to the Club. Anything I do bring will be held at the front desk until I leave for the day. The Boys & Girls Club is not responsible for items that are lost, stolen, or damaged.
- \_\_\_\_\_ Will be allowed to bring approved devices to the Club and a separate Device Policy must be completed.
- \_\_\_\_\_ Will act kindly and respectfully to others at the Club. The Club has a zero tolerance policy for fighting, teasing, name-calling, threatening language, horseplay, stealing, and destruction of Club property or sexual harassment. Such behavior will result in my suspension or removal from the program.
- \_\_\_\_\_ Will not bully any other members; this includes physical, verbal, and cyber-bullying. If I do, I may be suspended or removed from the program.
- \_\_\_\_\_ Must treat all Club property and equipment with respect. My parents or guardians will be held financially responsible for any damage caused.
- \_\_\_\_\_ Will have access to the internet. While on the internet, I must follow all staff directions, only access appropriate sites, and immediately notify a staff member if I see any content that is inappropriate. If I do not follow these rules, I will lose my technology privileges, and may be suspended or removed from the program.
- \_\_\_\_\_ Must follow Club dress code. Clothing items **not** allowed are: short-shorts, bare midriff tops, spaghetti strap tops, garments with inappropriate images or messages, flip flops, sandals, shoes with wheels or open-toed shoes.

### Club Behavior Policy

- All members, volunteers, and staff are required to follow Club rules as outlined in the Conditions of Membership at all times.
- Club discipline is determined fairly and consistently. Staff will report and discuss with you any disciplinary concerns and will attempt to resolve any concerns cooperatively.
- Serious or repeated behavioral concerns may result in a member's removal from our summer program.
- Corrective/disciplinary action will be taken as follows depending on the severity of the behavior:
  1. Documentation and Verbal Warning
  2. Level 1 Write-Up: Documentation and Verbal Warning, guardian signature required
  3. Level 2 Write-Up: Site Director will call home to notify guardian of write-up, discussion and signature required
  4. Level 3 Write-up: Phone call home, guardian meeting with Site Director, possible suspension and/or removal from the program

**I have read and understand the above policies.**

**Parent / Guardian Name** \_\_\_\_\_ **Signature** \_\_\_\_\_

**Child Name** \_\_\_\_\_ **Signature** \_\_\_\_\_