



BOYS & GIRLS CLUB
of North San Luis Obispo County

Paso Robles Summer 2019 MEMBERSHIP APPLICATION

*** Membership Expires 8/9/2019***

June 13th – August 9th

Renewing
Member since: (year) _____

New
Initials _____ Date _____

Staff Use Only

Collection Date ___/___/___ Staff Initials _____ Member's Name _____ Free / Reduced / NA Lunch

Amount Paid _____ Cash, Check, Card (circle one) Check# _____ Complete App. BC Utility Bill Master Agr.
Other Details:

Membership Coordinator Use Only

Entry Date ___/___/___ Coordinator's Initials _____

Please collect and complete the following to sign your child up for camp:

Copy of Birth Certificate and Current Utility Bill

Check One Below:

Entire Summer \$500 (open 40 days, \$12.50/day) \$100 holding deposit/registration fee is non-refundable

Payment Plan \$100 deposit/registration non-refundable (deposit goes toward \$500 fee).

I agree to pay _____ a (week/month) to total \$500 by Friday May 31st.

(OPTIONAL) Additional contribution to Club programming \$ _____

ATTENTION ALL SUMMER TUITION PAYMENTS ARE NON-REFUNDABLE

INCOMPLETE APPLICATIONS WILL BE RETURNED WITH MEMBER PLACED ON WAITLIST

Where did you hear about our program? _____

Member Information

First Name: _____ Last Name: _____ Middle: _____

Gender: M F Date of Birth: ___/___/___ Age _____ Attending Summer School? Yes / No

School: _____ Grade for **2019-2020** School Year: _____

My child qualifies and is signed up for the *free or* *reduced lunch program at their school*

Ethnicity: African American Caucasian Latino Asian Pacific Native American

Multiple Ethnicities Other: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Parent/Guardian Information (please only include individuals that are allowed to have contact with child)

1.) Relationship to child: _____

First Name: _____ Last Name: _____

Home Address: Same as Above or New Address: _____

Email: _____

Home Phone: _____ Cell Phone: _____ Works in Wine Industry? Y / N

Employer: _____ Position: _____ Work Phone: _____

2.) Relationship to child: _____

First Name: _____ Last Name: _____

Home Address: Same as Above or New Address: _____

Email: _____

Home Phone: _____ Cell Phone: _____ Works in Wine Industry? Y / N

Employer: _____ Position: _____ Work Phone: _____

Authorized to Pick Up & Emergency Contacts
***** Only Adults (18 years old+) May Pick-up*****

Name:	Name:	Name:
Phone Numbers	Phone Numbers	Phone Numbers
Home:	Home:	Home:
Work:	Work:	Work:
Cell:	Cell:	Cell:
Relationship:	Relationship:	Relationship:

Not Authorized for Contact with Child: *please complete as accurately as possible, and provide photo if possible. *Documentation required for any person with past legal custody*

Name(s): _____

Relationship to member: _____ Other Important Information: _____

Family Information

Please Complete as Accurately as Possible

Member lives with (if there is shared custody please provide percentages):

Mom: ____ Dad: ____ Step Mom: ____ Step Dad: ____ Grandparent(s): ____ Foster Parent(s): ____ Other: ____

\$10,000 or less \$10,001 – 20,000 \$20,001- 30,000 \$30,001 – 50,000 \$50,001 – 70,000 \$70,0001 +

Number in household: _____ Number in household under 18 years old(or legally dependent): _____

Current head of household: Female: Male: Both: Current single parent: Yes No

Medical /Special Education Information: Special accommodations or health needs? If YES, please explain: _____

Parent Permission

By signing this membership application, I hereby give permission for my son/daughter:

- To become a member of the Boys & Girls Club of North SLO County
- To participate in its programs, including internet access; and
- To complete any and all evaluation forms to improve its programs

Authorization for Emergency Treatment: I hereby give permission to the medical personnel selected by the Boys & Girls Club to order x-rays, routine tests, and treatment for my child, and in the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the Boys & Girls Club to hospitalize, secure proper treatment for, and to order injection and/or surgery for my child as named above.

Authorization for Media Release: I hereby authorize the Boys & Girls Club to use my child's name and picture for Boys & Girls Club promotional material in print, on the internet and television or video presentations.

Authorization for Swimming and off-site activities: I hereby authorize the Boys & Girls Club to take my child swimming at the Paso Robles Municipal Pool located on 28th and Oak St. I understand that my child will only be taken swimming when they have appropriate swimming attire such as: swim trunks or swim suit and a towel. From time to time children may have an opportunity to visit facilities throughout San Luis Obispo County for cultural, recreational, entertainment and/or educational purposes. These may be venues we visit by walking or by taking public transportation and always include staff escorts. My signature below gives the Club my approval and permission to take my child(ren) on these escorted trips and programs.

Drop In Policy:

- I understand that the Boys & Girls Club of North SLO County and its personnel are not responsible for the personal injury or loss of property.
- I understand that the Boys & Girls Club of North SLO County is not a licensed childcare facility.
- I understand supervision is not provided before or after Club hours.

Rules and Policies: I have received a copy of the rules and policies of the Club and have read and understand them.

Those receiving information under this release understand that this information is protected under state and federal law. They are not authorized to release it to an agency or person not listed on this release without specific written consent of the parent/guardian. By submitting this application I hereby agree to its terms and conditions.

Member Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

****SAFE PASSAGE AND RELEASE OF LIABILITY WAIVER****

I understand and agree that Boys & Girls Clubs of North SLO County has a Safe Passage policy that prohibits members from coming and going as they please. Boys & Girls Clubs of North SLO County will not be responsible for my son/daughter leaving the Club in violation of this policy, with or without my permission. I understand that once a child has checked into the Club for the day he/she will be told that they cannot leave until an authorized person arrives to retrieve him/her. In the case of a parent, guardian or authorized adult with a disability, staff will make accommodations to safely bring the Club member out to the adult picking up the members. I understand that Boys & Girls Clubs of North SLO County is not a licensed day care facility and that staff will not physically restrain members who insist on leaving without parent permission.

Authorization to Leave the Club Unescorted

My child is in 6th grade or above and has my permission to check him/herself out of the Club.

(Once a child leaves the Club they may not return unless accompanied by an adult identified in the membership application.)

I understand that because of the nature of the programs and activities in which the member may participate, there is a potential for injury. I recognize these risks and allow the Club member to participate in all activities and programs offered. I agree on behalf of myself and the member to assume the risks associated with all activities of the member with Boys & Girls Clubs of North SLO County. For good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned, on behalf of myself and the member, hereby agree to indemnify and hold harmless and to release, acquit and forever discharge Boys & Girls Clubs of North SLO County, its staff, and all other persons, organizations and corporations affiliated therewith of and from any and all loss, liability, claims, demands, damages, actions, causes of actions, suits, cost and expense (including reasonable attorney fees at or before trial and on appeal) for personal injury, death, disability, loss of income, property damage or otherwise arising out of or relating to the undersigned's and/or the member's participation in Boys & Girls Clubs of North SLO County or arising from or involving, in whole or in part, any alleged action or omission of Boys & Girls Clubs of North SLO County, including negligence.

As a parent/guardian, I am committed to educate my child about the dangers and consequences of weapons and/or illegal substances. Boys & Girls Clubs of North SLO County staff reserve the right to inspect personal belongings brought by members into the Club, including but not limited to bags and backpacks. The parents and/or legal guardians of the Club member will be notified immediately by Boys & Girls Clubs of North SLO County staff if a weapon or illegal substance is discovered from a search of the Club member's belongings. Boys & Girls Clubs of North SLO County staff may also contact the appropriate law enforcement agency to assist in the inspection of Club member belongings if it is deemed to be in the best and safest interest of the Club and its staff and members as a whole. I hereby certify that my child (member) is currently in TK or above, in good health, and capable of participating in Boys & Girls Clubs of North SLO programs. I have read, understand and will abide by all of the above. All information provided in this form is true and complete. I agree that any false or misleading representation or material omission may disqualify my child (member) from participating in Boys & Girls Club of North SLO County programs. I agree that any changes to this document must be made in writing by the Club member's legal guardian(s) who is physically present at the member's Club.

Member's Name: _____ Member's Birthdate: _____ Grade: _____

Legal Guardian's Name: _____ Relationship: _____

Signature: _____ Date: _____

Please fill out all parts of the form with a star next to them.
Please do not fill out any other areas. Thank you!

MASTER AGREEMENT FOR INDEPENDENT STUDY

* Student Name:	Student ID #:	* Grade Level:
* Address:	* Age:	* Birth Date:
* City:	* Zip Code:	* Home Ph Cell Ph
School of Enrollment/Program Placement for Independent Study:		
Duration of Agreement:	Beginning Date: 7 - 1 - 19	End Date: 8-31-19

* Email:

Objectives, Methods of Study, Methods of Evaluation, and Resources: We understand that the student is to complete the subjects/courses listed below, and that subject/course objectives reflect the curriculum adopted by the charter school's governing board and are consistent with charter school standards, as outlined in the charter school's subject/course descriptions. The specific objectives, methods of study, methods of evaluation, and resources for each course covered by this agreement are described in detail in each course syllabus.

Subjects/Courses Enrolled:

Course Title	Credits	Course Title	Credits
PE			

Additional Classes: May be added to the agreement as needed.

Reporting: We understand that students are required to report to their teacher(s) as scheduled. Manner of reporting: Through On-Line Messages, E-Mail, Phone, or In-Person Frequency: At least once every learning period X a Week Day: M-F, Time: 8:00-5:00, Place: Virtually or In-Person

Assignments: We understand that according to the school's policy for grades K through 12th Grade, the maximum length of time allowed between the assignment and the date the assignment is due is 20 days. After 5 missed assignments, an evaluation will be made to determine whether independent study is an appropriate strategy for this student.

Voluntary Statement: We understand that independent study is an optional educational alternative that students voluntarily select, including students covered under California *Education Code* sections 48915 and 48917. All students who choose independent study must be offered the alternative of classroom instruction, and they must have the continuing option of returning to the classroom.

Quality and Quantity; Rights and Privileges; Resources and Services: The independent study option is to be substantially equivalent in quality and quantity to classroom instruction. Students who choose to engage in independent study are to have equality of rights and privileges with the same access to existing services and resources as students in the regular school program.

Methods of Study: Examples of methods of study for the student will include but are not limited to: Independent Reading, Textbook Activities, Problem Solving, Study Projects, Drill & Practice, Computerized Curriculum, Web/Internet Research, Library Research, Field Trips, Learning Center Courses

Specific Resources: The school will provide appropriate instructional materials and personnel necessary to enable the student to complete the assigned work. Resources must include those reasonably necessary to the achievement of the objectives and must include resources that are normally available to all students on the same terms on which they are available to all.

Methods of Evaluation: Examples of acceptable methods of evaluation include, but are not limited to: Teacher Made Tests, Student Conferences, Progress/Report Cards, Chapter/Unit Test, Work Samples, Observations, State Standards Testing, Quizzes, Labs, and Finals.

Signatures and Dates: We have read and understand the terms of this agreement, and agree to all the provisions.

* Student: _____

* Date: _____

* Parent/Guardian: _____

* Date: _____

Supervising Teacher: _____

Date: _____

This form needs to be signed and dated before the program starts (July 1).



BOYS & GIRLS CLUB
of North San Luis Obispo County

Summer Camp 2019

****Parent & Guardian Flyer****

Contact Information	Online Resources
Paso Phone: (805)239-3659	Website: www.bgcslocounty.org
Paso Robles Site: 600 26 th Street Paso Robles, CA 93446	Facebook: facebook.com/bgcslocounty.org
Mailing: 2631 Spring Street Paso Robles, CA 93446	Twitter: twitter.com/BGC_Paso
	Email: meghan@bgcslocounty.org

Program Details

- Hours: Mon-Fri 7:30 am-6:00 pm
- Dates: June 13, 2019 – August 9, 2019 (Closed July 4th & 5th)

Rules and Policies

- **Orientation:** New parents/guardians to our summer camp must attend a Club orientation prior to the summer program start date in order for their child to attend. Failure to attend an orientation will result in loss of priority and loss of deposit. **(Friday, May 17th 6-6:30pm and Tuesday, June 4th at 12:30-1pm and 6-6:30pm)**
- **Respect:** Your child(ren) are required to maintain respectful, peaceful relations with staff and other children while attending the Club. At the discretion of the staff your child(ren) may be suspended or expelled from the Club due to behavioral issues. The Club staff will make every attempt to work with children and their parents on problematic behavioral issues to avoid suspension or expulsion, but no financial reimbursement will be given to families for days missed by their child(ren) due to suspension or expulsion from the Club.
- **Participation:** Your child(ren) are expected to participate in all Club activities to include but are not limited to Brain Gain, Wanna Play, Round Up Time, and nutrition breaks. Exceptions will only be made with a doctor's note.
- **Arrival & Departures:** Members will check in upon arrival & departure under the supervision of staff. Upon departure, please check your child out at the front counter. Only adults (18+) approved on the contact list may pick up your child.
- **Late pickups:** The Club closes at 6pm. Parents must call & make arrangements if there is an emergency and they may be late. If a parent has not called or can't be contacted by 6:05 pm, emergency contact numbers will be called and the member released to him/her. ***A fee of \$1.00 a minute applies if members are not picked up on time.***
- **Holidays:** The Boys & Girls Club will be closed on Wednesday, July 4th & 5th in observance of Independence Day.
- **Payment policy:** Entire Summer Pre-Pay and Holding Deposit are due by ***Friday, May 31st***. Any money deposited into a members account during the summer program can only be used during 2019 summer program. Money remaining in a members account after the last day of summer will be donated to club programs.
*****There is no financial reimbursement given for missed days regardless of the reasons for not attending the Club.***
- **Illness or discipline:** Please keep your child home if s/he shows any sign of illness. Sick children are not allowed to attend the Club.
- **Lice/Nits:** The Boys & Girls Club has a No Lice policy. If lice or nits are observed on a child we will contact their guardians immediately and their child must be picked up and taken home to be treated before they can return to the club. A note from the child's doctor will be required for them to return to the club.
- **Lost or left items:** Personal toys and any electronic device with the exception of a personal cell phone are not allowed. We recommend children not bring anything of value to the club as we cannot be responsible for it.
- **Change of status:** If there are any changes in address, phone numbers, custody/guardianship, medications, etc. please notify the club IMMEDIATELY so records are updated for emergency purposes.
- **Cell Phones/Electronic Devices:** All electronic equipment other than cell phones are not permitted at the Club and will be confiscated by staff and returned to the member's caregiver upon pick up. Cell phones may **only** be used to communicate with the member's caregiver and must be used at the front desk with Staff Member permission.
- **Club owned electronic devices:** Club owned computers and other electronic devices are to be used in accordance to club site policies. For example, no members are allowed into the computer room and use computers without authorization of staff.
- **School Holidays:** Members that attend our summer program are eligible to attend the Boys & Girls Club for \$15 per day on holidays that the Club is open. Club availability is dependent upon member sign-ups. Please contact the Club for more information.