

# GREAT FUTURES START HERE.



**BOYS & GIRLS CLUB**  
OF ADAMS COUNTY

We are thrilled that you have chosen the Boys & Girls Club of Adams County (AKA the Club) as your choice for after school programming and involvement for your child. We hope that you will find our program to assist you as a parent/guardian in developing your child into caring, responsible and productive citizens.

As you begin or continue your membership at the Club we too want to remind you that it is our goal to provide your child with a safe, positive place to learn and grow. With this being said we wanted to take the time to remind you of a few items that will assist us in making this a positive learning environment for each Club Member.

**Club Membership is privilege and NOT a right** – The Boys & Girls Club of Adams County reserves the right to refuse membership to any child at any time, with or without cause. The Boys & Girls Club is NOT A DAYCARE and is not governed by licensure as a childcare facility. The Club is not for every child, and we completely understand that many times the Club is not a good fit or the right environment for specific children. Communication with Unit Directors is always welcome and we will do our best to make sure that your child feels safe, welcome and valued, yet understand that this is not a guarantee that your child will fit into the environment at the Club.

**Guidance and Discipline** – We believe in our staff and their abilities to build a nurturing, caring and educational environment for your child. Each staff member's top priority is safety! Please understand that all members are held to a high standard of respect and responsibility. Inability to follow these standards will result in consequences provided by the staff and Unit Director, which will be communicated to members clearly, appropriately and in a timely manner. We ask that you as parents/guardians partner with the Boys & Girls Club staff in order to ensure that your child is prepared to enter Club each day understanding that he or she is responsible for his or her own actions and behaviors. The staff and Unit Directors do their very best at taking care of situations promptly. If a situation is discussed with you at home and is not reported to a staff member during Club hours, it is very difficult for our staff to tackle the situation head on and provide direction to each member involved. Therefore we ask that you as a parent/guardian talk with your child to ensure they are reporting incidents promptly to staff during their time in the Club.

**The Boys & Girls Club of Adams County does not provide individualized care or assistance to any member.** Our Staff go to great lengths to build a sound relationship with you and your child as well as hundreds of other members and their families. We highly encourage communication and will do our best to accommodate your child's needs but will not provide services based on a one-on-one basis. It is our goal to serve each member and assist them and continue to develop the future leaders of our community, yet we are limited to the capacity of our staff and membership load.

By signing acceptance page of the enclosed packet you are indicating that you understand and agree to the above information.

If you should have any questions regarding any of the above information please feel free to contact the Unit Director or Executive Director at any time! Again we are thrilled to have your child as a member of the Boys & Girls Club of Adams County and it is our goal to provide a safe, fun and caring environment for your child to learn and grow!

Sincerely,

A handwritten signature in black ink, appearing to read 'Christen Sprunger'.

Christen Sprunger  
Executive Director

A handwritten signature in black ink, appearing to read 'Jameson Ringger'.

Jameson Ringger  
Board President



## Boys & Girls Club of Adams County

### Policies and Procedures

2015-2016

**Check in/Pick up:** Each Club Member will check in at the front desk computer, will place their things in the designated areas, and head to their designated program area. When you are picking your child up from the Boys & Girls Club you **must come into the building** and check out your child at the front desk computer. This procedure ensures the safety of your child.

**Personal Belongings:** Your Club Member is responsible for their personal belongings (i.e. book bags, coats, gloves, hats, and personal items) while they are at the Club. The Club is not responsible for any lost or stolen items. Members are required to keep all belongings they bring with them in the shelves provided.

**Membership Forms:** In order for your child to attend Club they must have a completed application on file before attending. New forms are required for all members, whether new or returning, each school year. This procedure is in place in order to keep our records up-to-date and accurate as well as keeping emergency numbers and procedures in place.

**Damage Control:** If any damage occurs to the Club building, Club property, or any community facility while participating in Club activities and it is attributed to your child's behavior, you will be held responsible for the cost of repair. We understand that accidents happen and will consider the circumstances. The Executive Director will have the final evaluation for each case.

**Child Abuse Obligation:** It is the legal obligation of the Boys & Girls Club of Adams County to report any child abuse allegations made by Club Members or Club Parents. This ensures the safety of each of our Club Members.

**Communication:** We encourage open communication. Newsletters will be available every month to update you on Club events and information. If you have any questions, comments, and/or concerns, please feel free to contact the Unit Director. **We are here for you and your Club Member.**

We are thrilled to have your member as part of our Club Family! We hope that their time at the Club will be positive, encouraging, and will leave them with a sense of belonging.

# Membership Application Form '15-16

Boys & Girls of Adams County  
 South Adams Unit  
 117 E Main Street  
 Berne, IN 46711  
 (260) 589-8365  
 www.bgcac.org

**ENTIRE FORM MUST BE COMPLETED**

**Office Use Only**

<b>KidTrax ID</b> [ ]	<b>Member ID</b> [ ]	<b>Data Entry</b> Rec'd: [ ]
<b>Member Status</b> <input type="checkbox"/> New <input type="checkbox"/> Renewing <input type="checkbox"/> Former	<b>Active</b> <input type="checkbox"/> Active <input type="checkbox"/> Inactive	Entered: [ ] ID Issued: [ ]
<b>Comment:</b> _____ _____ _____		<b>Membership Dates</b> Service: [ ] Termination: [ ] Initial: [ ] Renewal: [ ]

**Member Contact Information (Please Print):**

<b>First Name of Club Member:</b> [ ]	<b>Middle Name:</b> [ ]	<b>Last Name:</b> [ ]
<b>Name of Person Member Lives With:</b> [ ]	<b>Home Phone Number:</b> [ ]	<b>Emergency Contact (Name):</b> [ ]
<b>Home Address:</b> [ ]		<b>Emergency Phone &amp; Extension:</b> [ ]
<b>City:</b> [ ]	<b>State:</b> [ ]	<b>Zip Code:</b> [ ]
		<b>Email Address:</b> [ ]

**Household Demographic Information:**

<b>Gender:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male	<b>Birthdate:</b> [ ]	<b>Age:</b> [ ]	<b>Ethnicity:</b> African American Hispanic	Asian Multi-Racial	Caucasian Other: _____
<b>Household Type: (Please circle one)</b> Single Parent   Two Parents   Other: _____			<b>School Information:</b> (Please circle one) South Adams Elementary South Adams Middle School South Adams High School Other: _____		<b>Current Grade:</b> [ ]
<b>Family Setting: (Please circle all that applies)</b> Mother   Father   Grandparents   Aunt /Uncle   Foster   Other					
<b>Total Family size:</b> [ ]					
<b>Member before? (Other than BGCAC-SA)</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Number of Years:</b> [ ]	<b>Name of Club:</b> [ ]			

**Parent/Guardian Information: (Please circle which one applies and fill out information below)**

**Parent   Guardian   Foster Parent**

<b>Father's First Name:</b> [ ]	<b>Father's Last Name:</b> [ ]	<b>Father's Work Phone &amp; Ext:</b> [ ]
<b>Father's Employer:</b> [ ]	<b>Father's Occupation:</b> [ ]	<b>Father's Cell Phone:</b> [ ]
<b>Mother's First Name:</b> [ ]	<b>Mother's Last Name:</b> [ ]	<b>Mother's Work Phone &amp; Ext:</b> [ ]
<b>Mother's Employer:</b> [ ]	<b>Mother's Occupation:</b> [ ]	<b>Mother's Cell Phone:</b> [ ]
<b>Guardian's/Foster Care First Name:</b> [ ]	<b>Guardian's/Foster Care Last Name:</b> [ ]	<b>Guardian's Work Phone &amp; Ext:</b> [ ]
<b>Guardian's/Foster Care Employer:</b> [ ]	<b>Guardian's/Foster Care Occupation:</b> [ ]	<b>Guardian's/Foster Care Cell Phone:</b> [ ]

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

**Medical/Emergency**

Medical Problems/Allergies: <input style="width:95%; height: 20px;" type="text"/>	Medications: <input style="width:95%; height: 20px;" type="text"/>	
Physician: <input style="width:95%; height: 20px;" type="text"/>	Physician Phone: <input style="width:95%; height: 20px;" type="text"/>	Preferred Hospital or Clinic: <input style="width:95%; height: 20px;" type="text"/>

**Pick up Information**

<b>List all Persons Authorized to pick up Member (not including Parents).</b>				
1.) First Name: <input style="width:95%; height: 20px;" type="text"/>	Last Name: <input style="width:95%; height: 20px;" type="text"/>	Contact #: <input style="width:95%; height: 20px;" type="text"/>	Pickup Authorized Password: <input style="width:95%; height: 20px;" type="text"/>	
2.) First Name: <input style="width:95%; height: 20px;" type="text"/>	Last Name: <input style="width:95%; height: 20px;" type="text"/>	Contact #: <input style="width:95%; height: 20px;" type="text"/>	Persons Not Authorized: <input style="width:95%; height: 20px;" type="text"/>	
3.) First Name: <input style="width:95%; height: 20px;" type="text"/>	Last Name: <input style="width:95%; height: 20px;" type="text"/>	Contact#: <input style="width:95%; height: 20px;" type="text"/>	<div style="border: 1px solid black; padding: 5px;"> <p><b>Member is able to walk to city parks with staff as a Club activity?</b></p> <p style="text-align: center;">Yes      No</p> </div>	
4.) First Name: <input style="width:95%; height: 20px;" type="text"/>	Last Name: <input style="width:95%; height: 20px;" type="text"/>	Contact#: <input style="width:95%; height: 20px;" type="text"/>		
5.) First Name: <input style="width:95%; height: 20px;" type="text"/>	Last Name: <input style="width:95%; height: 20px;" type="text"/>	Contact#: <input style="width:95%; height: 20px;" type="text"/>		
Member is able to walk or ride his/her bicycle to/from the Club?      Yes      No				
If YES, restrictions: (please circle all that apply)				
No Restrictions	Only in daylight	With Sibling(s)	Phone Permission needed	Summer Club Hours Only
After _____ p.m.      Other: _____				

**Confidential** 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.

<p><b>Household Income:</b> <b>Please Check One</b></p> <p><input type="checkbox"/> \$9,000 or under</p> <p><input type="checkbox"/> \$9,001 to \$12,000</p> <p><input type="checkbox"/> \$12,001 to \$19,000</p> <p><input type="checkbox"/> \$19,001 to \$23,000</p> <p><input type="checkbox"/> \$23,001 to \$28,000</p> <p><input type="checkbox"/> \$28,001 to \$32,700</p> <p><input type="checkbox"/> \$32,701 to \$37,500</p> <p><input type="checkbox"/> \$37,501 to \$42,000</p> <p><input type="checkbox"/> \$42,001 to \$45,000</p> <p><input type="checkbox"/> over \$45,000</p>	<p><b>Do you or your child receive any of the following forms of public assistance or school programs? Please check all that apply and include your case number or insurance card number as applicable.</b></p> <p>_____ TANF (Temporary Aid for Needy Families)</p> <p>_____ Food Stamps</p> <p>_____ Medicaid</p> <p>_____ Hoosier Healthwise</p> <p>_____ Reside in Public Housing (HUD or Section 8)</p> <p>_____ Free Lunch Program</p> <p>_____ Reduced Lunch Program</p> <p>_____ 21<sup>st</sup> Century Program</p> <p style="text-align: center;">_____ Yes, I give school officials permission to share with BGCAC Free/Reduced Lunch Program status</p>
---	---

I give my consent for photographs and/or electronic images, in which my son/daughter may appear, to be used in any way the Boys & Girls Club of Adams County may care to use them.

**Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

I have read the completed application, understand the rules of the Boys & Girls Club of Adams County and request that my son/daughter be admitted into membership. I have explained the rules to my son/daughter and agree that the Boys & Girls Club of Adams County will not be responsible for any accident to the boy/girl while on the Boys & Girls of Adams County premises or while engaged in any of its activities away from the Boys & Girls Club of Adams County.

**Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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



**Boys & Girls Club of Adams County South Adams Unit  
2015-2016 School Year Permission Slip**

I \_\_\_\_\_ give my child \_\_\_\_\_  
permission to attend off campus visits and program enhancing field trips with the Boys & Girls  
Club of Adams County South Adams Unit. I will be responsible for checking the Boys & Girls Club  
Monthly Programming Calendar as well as any and all Club News for dates and times of these trips.

I understand that if my child participates in off campus visits and program enhancing field trips, it  
is my responsibility to make sure he or she is dropped off promptly for departure and picked up  
according to Club hours or return to the Club post-trip.

I understand that my child will be responsible for his or her behavior and is under the supervision of staff  
members during the entire duration of a trip. If my child's behavior does not coincide with the Boys &  
Girls Club policies and procedures when participating in an off campus trip, I understand that it will be my  
responsibility to pick up my child from his or her location upon notification from the Club.

Guardian Signature \_\_\_\_\_

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

Date \_\_\_\_\_

Child's Name \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Emergency Contact Phone Number \_\_\_\_\_