Membership Information Form

Member #: _____

Receipt #: _____

Exp. Date: _____

Boys & Girls Club of Troy
3670 John R Road
Troy, MI 48083

P: (248) 689-1687 F: (248) 689-3238

Confidentiality: Any confidential information requested is for our records and for the funding our Organization receives. The answers you provide will be kept completely confidential. Your cooperation in providing this information is both appreciated and necessary. Required fields are denoted with an asterisks(*)

Head of Household (Please Print)

First Name:* | Last Name:* | Gender:* ○ Male ○ Female

Family Income:*
$44,001 and above

Address:*
(Line 1)
(Line 2)
(City) (State) (Zip Code)

Address Type:* ○ Home ○ Work ○ _____

Phone Number:*
( ) -
( ) -

Phone Type:* ○ Home ○ Work ○ _____

Family Size:*

E-Mail Address:*

E-Mail Type:* ○ Home ○ Work ○ _____

Employer:* | Job Title:* | Occupation:

Additional Parent/Guardian (Please Print)

First Name: | Last Name: | Gender: ○ Male ○ Female

Address: If same as above, just state that in line below.
(Line 1)
(Line 2)
(City) (State) (Zip Code)

Address Type: ○ Home ○ Work ○ _____

Phone Number:
( ) -
( ) -

Phone Type: ○ Home ○ Work ○ _____ ○ Home ○ Work ○ _____

E-Mail Address:

E-Mail Type: ○ Home ○ Work ○ _____

Employer: | Job Title: | Occupation:

Member Information (Please Print)

First Name:*

Middle Name:

Last Name:*

Nick Name:

Birth Date:*

/ /

Gender:*

- Male
- Female

Ethnicity:*

African American

School:*

Grade:*

1

Household Type:*

Single Parent Household

Family Setting:*

- Father
- Grand-Parent(s)
- Mother
- Sibling(s)
- Foster Parent(s)
- Guardian(s)
- Relative(s)
- Step Parent

Referring Organization:

Print Ad

Club Member's Address:*

(Line 1)

(Line 2)

(City) (State) (Zip Code)

Club Member's Phone Number:

( ) -

E-Mail Address:

Member Medical Information (Please Print)

Insurance Company:

Insurance Policy Number:

Medications:

Medical Problems/Allergies:

Physician:

Physician Phone:

Hospital:

Hospital Phone:

Disabilities:

Emergency Contact Information

Two emergency contacts other than parent(s) or guardian(s) listed earlier:

1.) First Name:

Last Name:

( ) -

Home Work

2.) First Name:

Last Name:

( ) -

Home Work

I have read the completed application, understand the rules of the Boys & Girls Club of Troy 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 Troy will not be responsible for any accident to the boy/girl while on the Boys & Girls Club of Troy premises or while engaged in any of its activities away from the Boys & Girls Club of Troy. I give my consent for photographs, in which my son/daughter may appear, to be used in any way the Boys & Girls Club of Troy may care to use them.

Parent or Guardian Signature

Member's Signature

Date

CONTINUE NEXT PAGE

Please review these policies and procedures and sign & date this form:

- **Open Door Policy:** The Club strongly encourages members to stay inside the building where there is supervision. However, we emphasize that we maintain an "Open Door Policy." It is the responsibility of the parent/guardian to instruct children as to whether or not they are allowed to leave the Club's supervised areas, and it is the member's responsibility to adhere to these guidelines.
- **Extended Hour Policy:** The Boys & Girls Club of Troy charges extended hours any weekday the Club is open from 7am to 6pm. The charge is $3.50/hr. per child for any portion of the hour. The extended hours policy is in effect from 7-10am and 4-6pm. It is the member's responsibility to sign in and out of the Club. Parents/guardians are responsible for extended hours, even if the member forgets to sign out. It is a requirement for Club membership to have credit card information on file with the Club office in order to automatically process extended hours fees as well as late pickup fees.
- **Late Fees Charges:** Please be aware of closing times as they vary based on school calendar and summer break. If parents/guardians are late picking up a child after closing time, please call to let staff know when to expect arrival. Parents/guardians will be charged $1 per minute/per child after closing time due immediately. A second offense of this policy will result in suspension of membership privileges for 3 days. A third offense of this policy will result in termination of membership.
- **Refunds:** Membership and program fees are non-refundable.
- **Lunches:** The Club does not provide lunch or plates/utensils. Glass bottles are not allowed. A microwave is available for member use. Members are required to eat & drink in certain areas.
- **Membership Cards:** It is the member's responsibility to have their membership cards with them at all times while using the Club. It is their responsibility to sign in and out of the Club. Not having a card can and will limit what they will be allowed to participate in. Replacement membership cards cost $2.00. Parents/guardians are required to purchase a new card after 3 visits of a member attending without a card.
- **Personal Belongings:** The Club does not have any secure storage areas for members' personal belongings, and is not responsible for any items lost or stolen. The Club strives to teach all of their members to be responsible and they must keep track of their own possessions. Members are encouraged not to bring more than they can keep with them at all times.
- **Wi-Fi and Electronics:** Members are only allowed to use personal electronic devices (including, but not limited to: cell phones, tablets and gaming systems) and Wi-Fi during non-programed activities. Staff has the authority to dictate length and frequency of use. Members are not allowed to take pictures or video without permission, engage in bullying or abuse, or have other members use their devices. The Club is not responsible for any device that is lost, confiscated or damaged. Failure to abide by these guidelines will result in loss of electronics privileges or confiscation of devices, and can lead to suspension.
- **Club Telephone Use:** Members are not allowed to receive or make telephone calls from the Club phones – emergencies are an exception. Please be aware that staff will screen all requests for outgoing calls. There is a charge of 25 cents for an emergency outgoing call.
- **Permission Slips:** Written parental permission is required for all outings away from the Club.
- **Medications:** If a child is required to take medication while at the Club, the child's doctor must complete a medication form (especially for long term medications). All medication will be kept in the Administrative Office and distributed by qualified staff.
- **Media Permission:** Parents/guardians understand that Club membership includes permission for members to be featured in promotional materials, membership accounts and communications about the Boys & Girls Club of Troy. This includes newspaper coverage of activities at the Club and postings on social media platforms.
- **Member's Behavior:** Members are required to respect Club equipment, respect the property of others and help keep the Club clean. The Boys & Girls Club of Troy reserves the right to suspend a child from Club activities. If this should happen, it is the responsibility of the parents/guardians to meet with a director.

Parent/Guardian Signature:	**Date:**