

Kids' Clubhouse Enrollment Form

Name of Child (last name, first name)		name)	Date of Birth			
Parent or G	Guardian's Name	Home Address	Home Phone # / Cell Phone # *			
Emergency Authorized	Contact and/or to Pick-Up	Home Address	Home Phone # and/or Cell Phone #			
Employer		Work Address	Work Phone # *			
Parent or G	Guardian's Name	Home Address	Home Phone # / Cell Phone # *			
Employer		Work Address	Work Phone # *			
*Please i	nitial below.					
on how the determine	ney are reopening es that distance l	g and that the Club will pro earning is the safest option	Newport County is working closely with the schools ovide full days of care for families in case the state n. eir plans as soon as the final reopening plans for			
			ook different and the Club will determine this based nce the Club's plans are approved.			
		Medical Informati	on and History			
First Aid:	I authorize the	Program Staff to administe	er first aid treatment to my child.			
Hospital:	& Girls Club of medical action	Newport to contact me at	d that a conscientious effort will be made by the Boys the emergency numbers I have provided before any mergency, I understand that choice of hospital may equad.			
Doctor:	I authorize the health of my chi		tM.D. at (Phone #) stions the Program Staff may have regarding the			
Social:	Please attach a	letter stating any additiona ould be pertinent to their pa	al information on how your child functions in a group articipation at the Club.(withdrawn, shy, reactive,			

<u>Transportation Permission (based on traditional Club programming)</u>

give per	mission for my child
o be transported by the Boys & Girls Club of Newport to order to attend the KIDS CLUBHOUSE program. An aut	to an/or from school, in horized adult must be present at home or the child will be up. Any changes to transportation home must be made
o have your child partake of these meals, please	vide free nightly meals to all participants. If you do not wish e speak with our Program Coordinator. BGC is an equal ll state and federal requirements. Please see our staff for a questions.
have read and understand all the policy information hese policies.	on that has been provided to me and agree to comply with
Parent/Guardian's Signature	Date
Parent Authorization for F	' Clubhouse First Aid & Emergency Treatment
child. I authorize the Program Staff to c	Program Staff to administer first aid treatment to my ontactM.D. at with questions the Program Staff may have regarding
for medical examination and/or treatment of r should an emergency arise at the Club or on of Newport will make a conscientious effort	orize the Boys & Girls Club of Newport to arrange my child, a field trip. I understand that the Boys & Girls Club to contact me at the emergency numbers I have taken. I understand that choice of hospital may
Health Insurance Plan	
Policy Number	
Please note that all emergency contacts are	denoted on the Kids' Clubhouse Enrollment Form.
Parent/Guardian Signature	 Date
Parent/Guardian Signature	 Date

Kids Clubhouse Policy & Procedure Updated Handbook Acknowledgement

By signing below, you acknowledge that you have reappolicies and procedures outlined in this manual by the	
Parent/Guardian Signature	Date
Child's Name	-

Discipline Policy & Procedures

The Kids' Clubhouse staff use positive methods of discipline which encourage self-control, self-direction, self-esteem and cooperation.

The staff is prohibited from using the following means as punishment.

- 1. Hitting, shaking, biting, pinching or inflicting any form of corporal punishment.
- 2. Restricting a child's movement by binding or tying him or her.
- 3. Mental or emotional punishment such as humiliating, shaming or threatening a child.
- 4. Depriving a child of meals, snacks, rest or necessary toilet use.
- 5. Confining a child in an enclosed area such as a closet, locked room, box or similar cubicle.

*Non-severe discipline or restraint may be used when reasonably necessary, based on a child's development, to prevent a child from harming themselves, other persons, or property.

All staff members are expected to handle the discipline of the children in their charge. A child is sent to the Director when:

- 1. The staff person has used all resources at his/ her disposal and the member still refuses to cooperate. Before a child is sent to the Director, it is expected that the staff member has made the following efforts to solve the problem:
 - a. Give the child an opportunity to explain their behavior and identify a more appropriate response.
 - b. Warn the child to correct his/ her behavior
 - c. Use fair judgment in deciding the consequence, ex. Removal from activity, formal discipline report to parent or guardian.
- 2. In the event that a child commits an act which calls for his/ her immediate removal from the activity, either to maintain control or to protect the safety of the group, the child is taken to or sent to the office of the Director. The Director, after considering the facts will take the appropriate action.
- 3. In the event of serious breaches of discipline policy, dismissal from any program or activity will be served with due process, but dismissal by the Director (pending the hearing) will be enforced where necessary. The Director will, in the final analysis, exercise the authority and assume the responsibility for the proper application of all rules.
- 4. Repeated episodes of any behavior issues (stealing, bullying, fighting, etc...)will be handled individually, keeping in mind that dismissal from a program will be applied only in extreme cases, where all efforts to improve behavior have failed.

	suspen	sions v	vill be r	eviewed	by the	Director	r of P	rograms	and the	Ass	stant
Executiv	ve Direc	tor. If a	a child i	s suspe	nded fo	r more	than	one day,	parents	or g	guardians
must co	ommunic	cate wit	th the D	Director of	of Progra	ams befo	ore the	e child m	ay return		

Discipline Policies and Procedures Acknowledgement

I have read the attached Discipline Policy & Procedures and understand they will apply to my child upon entering the Kids' Clubhouse program at the Boys & Girls Club of Newport. I will review this document with my child. I agree that my child and I will abide by the attached Discipline Policy & Procedures.

Please sign and date below and return this page to the Director of Programs or the front office at the Boys & Girls Club of Newport. Please retain the attached Discipline Policy & Procedures document for your records

Signature:	Date:
Name of Child:	



Youth Financial Aid Application

(Parent/Guardian F	ull Name)				
Member(s) name(s)					
(Mailing Address)		/ /			@
(Primary Phone)		er phone	(Email)		
•		-	er Separated/ Div	vorced Widowo	ed
		ssistance or RITE Car			
If yes, DHS Certific	ate # or RITE Car	e#	(skip to signature	e)	
Does your child qu	alify for free/red	luced lunch at school	l yes No		
	, ,		en & adults including ye		T. 1 17/01
Name	Relationship to You	Age	Gender M/F	Attending School Y/N	Employed Y/N
Household Einene	ial Information.	Found income for a	ll adults in household	•	
Family Men		Gross Earnings (Yearly)	Other Income (Alimony, Pensions, Child Support Etc)	Total Income (Yearly)	Estimated Expenses (Yearly) Optional
ex. Jane Smith		14500	1000	15500	10000
office use only Number In Househ	old	Total Combined Gross Income	Total Combined Other Income	Total Combined Yearly Income	Total Combined Expenses

Caretaker illness will reduc	e family income.		
The second of th	. yy	`	
			_
TUDE. I contifu that all of this is	nformation is true and correct and th	ot all income is remarked	date
	t County reserves the right to		ing the information repor
ollity Chart 2017/2018 (B	ased on Federal Poverty Gui	150% to 200%	200.0/ 45.2500/
Household Size	Qualifies for 75%	Qualifies for 50%	200 % to 250% Qualifies for 25%
1	\$18,090	\$24,120	\$30,150
2	24,360	32,480	40,600
3	30,630	40,840	51,050
4	36,900	49,200	61,500
5	43,170	57,560	71,950
6	49,440	65,920	82,400
7	55,710	74,280	92,850
8	61,980	82,640	103,300
	unted from original price	Weekly Rate/ total	program cost : \$
e use only % disco			
•			
•			
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