



**BOYS & GIRLS CLUBS**  
OF SPOKANE COUNTY

**2010**

**MEMBERSHIP PACKET**

Visit us on the web at [www.bgcspokanecounty.org](http://www.bgcspokanecounty.org)



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**Club Location**

Northtown Branch  
544 E Providence  
(509) 489-0741

## Our Mission:

The Boys & Girls Clubs of Spokane County is a youth development agency, serving youth 6-18 years of age, whose *mission* is to inspire and enable all young people, especially those from disadvantaged circumstances, to realize their full potential as productive, responsible and caring citizens.

## About Our Programs

Boys & Girls Clubs build character through everyday leadership and guidance in behavior and attitude. Young people of all nationalities, races and creeds join together in wholesome recreation and companionship. Trained professional staff provides positive adult mentors and role models. Nationally recognized programs help young people succeed in schools, stay healthy, learn important life skills, pursue interests in the arts and sports, and explore vocational choices.

## Check In/Check Out Policy

Staff members do not give permission for Club members to leave the Club, nor do they insist they stay. The decision as to when a Club member arrives and leaves the Club, and with whom, is a matter between the parent and child. We are a *drop in* program, meaning that during our Club hours members are free to come at any point and likewise, leave at any time. Members are required to sign themselves in and out each time they visit the Club.

<u>Hours of Operation</u>	
School Year:	Monday – Friday 3:00–7:00
Summer:	Monday – Friday 9:00 – 6:00
No School/ Early Release:	1:00 – 6:00

<u>Daily Schedule</u>	
3:00-3:30	Kids arriving, open gym/games
3:15-3:40	Snack
3:45/4:30	Club Fusions (assembly times)
3:50-4:30	First switch time (high yield learning activities)
4:35-5:15	Second switch time
5:15-7:00	Free Time

## Zero Tolerance Policy

The Boys & Girls Clubs of Spokane County has adopted a **ZERO TOLERANCE** policy for disturbing or intimidating behavior at all Club functions, activities, athletic events and special events. This includes but is not limited to: vulgar language; physical or verbal bullying; harassment; intimidation; racial, religious or gender related comments or gestures; as well as the use of weapons, drugs, alcohol and tobacco. Such behavior will result in immediate suspension from current Club activities and programs and depending on the severity of the offense could lead to long term suspensions. If needed, a meeting will be set up with the executive director to discuss further action including but not limited to permanent suspension of privileges. Decisions made by the Boys & Girls Clubs of Spokane County will be fair and based on the best interests of the children the Club serves. This policy will be strictly enforced and all decisions will be final.

The Boys & Girls Clubs do their best to protect and celebrate the rights of all the members we serve. We appreciate your support of the youth we serve and this policy. Thank you from the Boys & Girls Clubs of Spokane County.



# Membership Form 2010

**Requirements: Grades K - 12**  
**Membership Fee: \$10.00 per child per calendar year (Jan. 1 - Dec. 31)**

**Member Information:**

Member's Name \_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Home Phone \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

School \_\_\_\_\_ Age \_\_\_\_\_ Grade Level \_\_\_\_\_

Child Lives With: ( ) Mother ( ) Father ( ) Both ( ) Other \_\_\_\_\_

Ethnicity: ( ) Caucasian ( ) Hispanic ( ) African American ( ) Other

Does Child Receive Free/Reduced Lunch? \_\_\_\_\_ Does Child Have Health Ins? \_\_\_\_\_

List Any Known Medical Conditions, Disabilities or Allergies. Write none if not applicable.

**Household Information:**

# of Residents In Household: \_\_\_\_\_ Is the Primary Guardian a Single Parent? \_\_\_\_\_

Annual Household Income: ( ) \$ 0 - \$9,999 ( ) \$ 10,000 - \$ 19,999  
( ) \$ 20,000 - \$ 29,999 ( ) \$ 30,000 - \$ 49,999  
( ) \$ 50,000 +

Guardian 1: \_\_\_\_\_  
Full Name Relationship to Child

Employment Work Phone Cell Phone

Guardian 2: \_\_\_\_\_  
Full Name Relationship to Child

Employment Work Phone Cell Phone

Emergency Contact: \_\_\_\_\_  
Full Name Relationship to Child

Employment Work Phone Cell Phone

**Member Consent:**

I promise to take care of my Club and property by respecting Club Staff, Club Members, and Club equipment. I also understand that I am expected to behave respectfully and follow **ALL** other Club rules and policies.

Member Signature \_\_\_\_\_ Date \_\_\_\_\_

**Guardian Consent:**

I/We, the parent/guardian of the applicant, hereby approve and consent this application for membership in Boys & Girls Clubs of Spokane County. I/We hereby consent to his/her being given a physical examination, emergency treatment by a physician or hospital in case of an accident do to his/her taking part in various athletic, cultural and social activities of the BGCSC. I/We agree to hold harmless BGCSC, members of their board, staff, authorized volunteers and instructors for accidental injury to the applicant or damage to the applicant's property. I/We understand that BGCSC does not cover the applicant with any primary medical insurance coverage and that the parent/guardian is financially responsible for any treatment provided. I/We also give consent to BGCSC to take photos of our child to use in BGCSC publications, newspaper articles, and other club materials. I/We understand that our child must follow the rules and regulations or they can be suspended or expelled from the BGCSC. We also understand that the BGCSC has an open door policy and it is up to the parent/guardian to discuss with our child when they can leave the Club property. If a child is left beyond closing, a staff will make attempts to contact the parent/guardian, if neither answer the emergency contacts will be called.

**I/We the parent/guardian agree we have read and agree to the terms and conditions stated in this application for membership. I/We also agree that the information provided is accurate as to our best knowledge.**

Guardian's Full Printed Name: \_\_\_\_\_

Guardian's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Sponsor a Child:    ( ) \$5    ( ) \$10    ( ) \$25    ( ) \$50    ( ) Other \_\_\_\_\_

***WELCOME TO THE BOYS AND GIRLS CLUBS OF SPOKANE COUNTY!!!!!!***

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**For Office Use:**

Total Due \_\_\_\_\_ Paid \_\_\_\_\_ Scholarship \_\_\_\_\_

Membership Number \_\_\_\_\_

Packet Completed \_\_\_\_\_ Missing Information \_\_\_\_\_

Staff Signature \_\_\_\_\_ Date \_\_\_\_\_