



**BOYS & GIRLS CLUBS**  
OF GREATER MILWAUKEE

# Club Membership Form

## Instructions to Parent (s) or Guardian:

For your child's well-being, the information you provide must be complete and accurate. This information is necessary to maintain funding, state compliance and records for Boys & Girls Club service. **The membership form will NOT be accepted without all forms completed and additional items received.** Please check off each box below as you complete each section.

- Member Personal Information Form**
- Health History and School-Age Agreement Form**
- Proof of Child's Age** (Show birth certificate or baptismal record) - Ages 5-12
- CURRENT** School Id or Report Card— Ages 13—Up
- Immunization Records (Members Age 4—12 Required)**
- Health Physical (needed for 4-year old members at select sites)**
- Code of Conduct Agreement**
- Am I Eligible Form (All Families are REQUIRED to complete Form)**

### For Office Use Only:

- Renewing Member       New Member       \_\_\_\_\_  
(Location)
- Membership Forms Complete
- \$ \_\_\_\_\_ Membership Fee Paid       SPARK
- \$ \_\_\_\_\_ Scholarship Amount       TABS
- \_\_\_\_\_  
(Staff Receiving Membership Application)      (Date)
- \_\_\_\_\_  
(Office Manager Signature)      (Date)







# Health History and School-Age Agreement

14. Health History and Emergency Care Plan	Special Medical Conditions: Health Problems (check <u>all</u> that apply):
<p><b>Physician/Insurance Information:</b></p> <p><b>Physician Name/Medical Facility:</b> _____</p> <p><b>Address</b> _____</p> <p><b>Phone Number</b> _____</p>	<p><input type="checkbox"/> No, specific medical problems</p> <p><input type="checkbox"/> Asthma</p> <p><input type="checkbox"/> Diabetes</p> <p><input type="checkbox"/> Epilepsy / Seizure Disorder</p> <p><input type="checkbox"/> Gastrointestinal or feeding concerns</p> <p><input type="checkbox"/> Emotional / behavior disorder including ADD or ADHD</p> <p><input type="checkbox"/> Cerebral palsy/ motor disorder</p> <p><input type="checkbox"/> Other _____</p>
<p><b>Insurance Policy Holder Name:</b> _____</p> <p><b>Insurance Company</b> _____</p> <p><b>Insurance Policy Number:</b> _____</p>	<p><b>Prescription or Over-the-Counter Medications:</b> <input type="checkbox"/> No <input type="checkbox"/> Yes, Please list: _____</p>

Triggers that may cause medical problems – specify: \_\_\_\_\_

Signs or symptoms to watch for: \_\_\_\_\_

When to consider that the condition requires emergency medical care: \_\_\_\_\_

When to call parents regarding symptoms or failure to respond to treatment: \_\_\_\_\_

Steps Club staff should follow: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

## 15. School-Age Agreement: (ONLY FOR PALS – MEMBERS AGES 8 and YOUNGER)

<p><b>My child will arrive to the Club from:</b> (check <u>all</u> that apply)</p> <p><input type="checkbox"/> School</p> <p><input type="checkbox"/> Home</p> <p><input type="checkbox"/> Other _____</p> <p><b>My child will arrive to the Club by way of:</b> (check <u>all</u> that apply)</p> <p><input type="checkbox"/> Walking</p> <p><input type="checkbox"/> Parent/Guardian</p>	<p><b>My child is authorized to be picked-up by the following individuals (list <u>all</u> that apply):</b></p> <p>1. _____ (Name) _____ (Phone)</p> <p>_____ (Address)</p> <p>2. _____ (Name) _____ (Phone)</p> <p>_____ (Address)</p> <p><b>My child is authorized to leave the Club by way of: (check <u>all</u> that apply)</b></p> <p><input type="checkbox"/> Parent/Guardian <input type="checkbox"/> Sibling <input type="checkbox"/> Walking <input type="checkbox"/> Other _____</p>
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**Parent/Guardian Please Read and Sign:**

My child has my permission to participate in Boys & Girls Clubs of Greater Milwaukee activities. I understand that it is my responsibility to monitor my child's participation in Club activities based on any physical or medical limitations that my child has that would inhibit his/her participation. I understand that the B&GCGM operates under an open door policy therefore; it is my responsibility to monitor and provide transportation for my child to and from the Club. Furthermore, I understand that by sending my child to the Boys & Girls Clubs, I am authorizing the Clubs to determine my eligibility for W-2 childcare assistance. If my household is eligible and my child attends the Club regularly, the Boys & Girls Clubs will be designated as my childcare provider.

In the event of injury or should emergency care be required, I authorize Club staff to arrange for emergency medical attention for my child.

I understand that my child may receive non-invasive physical exams and/or other types of assessments as a benefit of his or her membership. I give permission for my child to participate in surveys, discussion groups or other activities that help determine the success of Club programs. I authorize Boys & Girls Clubs to obtain or share data related to my child for the purpose of program assessment. I authorize release of information from school about my child so that the Clubs can best serve its members. I grant permission for photographs, audiotapes and records of my child to be used by the Club and its agents for public relations and/or program evaluation purposes on behalf of the Boys & Girls Clubs of Greater Milwaukee. Boys & Girls Clubs has permission to receive and share information (for use of identifying program and opportunity needs) with agencies serving our members such as: Health Department, other Health Agencies and Milwaukee Public Schools.

\_\_\_\_\_

PRINT Parent / Guardian Name Parent/Guardian Signature Month / Day / Year



# Code of Conduct Agreement

We are excited to have you join as a **MEMBER** of the Club! We know you will have a great experience. As a Member you will have the opportunity to receive assistance with homework, participate in sports, learn about computers, or just hang out in the Games Room. However, as the *Positive Place for Kids*, our Club has rules that every member must follow to ensure a safe and enjoyable experience for all members. There may be other rules that pertain to specific programs as needed. Violation of any of the following rules could lead to a suspension or termination of your membership. Members and guests must abide by the same rules whether on Club property or off-site in a Club-sponsored program.

## MEMBERSHIP CARD

Your membership card is your ticket to fun, year-round activities at any of the Boys & Girls Clubs in Milwaukee, Waukesha & Camp Whitcomb/Mason.

## FORGOTTEN CARD

The member may either pay 50 cents or complete Club service to receive an OK Pass for that day only.

## LOST CARD

The member may either pay \$1.00 or complete Club service to receive a new card. Club Service consists of duties (like clean-up) assigned by the Boys & Girls Club staff.

The Boys & Girls Clubs of Greater Milwaukee requires all Club Members to fully comply with the ***Club's Code of Conduct*** when participating in Club activities. I will:

- Scan in and out with my Club Card every day that I come to the Club;
- Check in my coat, hat and book bag at Coat Check when entering the building;
- Be respectful of myself, other youth, equipment and property at the Club;
- Use words that are respectful, not hurtful or offensive such as profanity or name calling;
- Not use or bring tobacco, alcohol or drugs with me;
- Not fight with other Members, guests or Club staff;
- Not carry, pretend to carry or threaten to carry weapons;
- Not engage in sexual activity, sexual language, behavior or gestures;
- Cooperate with all directions and requests by Club staff;
- Not gamble or steal from other Members or guests, Club property or neighbors;
- Not run at the Club or operate an unsafe environment for anyone;
- Not bring electronic equipment or valuables like pagers or cell phones to the Club;
- The Club is not responsible for any lost or stolen items;
- Eat or drink only in designated areas and dispose of garbage properly;
- Leave out the front door at the end of my Club visit each day;
- Report any problems or injury to Club staff immediately; and
- Bring in a permission slip to participate in field trips or special programs.

***I will honor the Club Code of Conduct during Club activities, whether at the Club, Camp, Community Learning Center (CLC) or on field trips.***

**Club Member Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_



# Am I Eligible?

Boys & Girls Club Location: \_\_\_\_\_

In order for my child(ren) to become a member(s) of the Boys & Girls Clubs of Greater Milwaukee (BGCGM), I understand and agree to the following conditions:

1. I must fully complete the "Am I Eligible?" ACCESS tool to determine my eligibility for the Wisconsin Shares Childcare program or provide my case number.
2. If eligible for Wisconsin Shares, I will identify BGCGM as my provider.
3. If I currently have an open Wisconsin Shares case, I will identify BGCGM as my provider.
4. If my child(ren) utilize another daycare in addition to BGCGM, I will establish a split authorization of my Childcare as needed.
5. I will maintain my case and identify BGCGM as my childcare provider as long as my child(ren) attend BGCGM.
6. Failure to meet the above conditions may prohibit my child(ren) from attending BGCGM.

Signature (Required): \_\_\_\_\_ Date: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Do you currently have an open Wisconsin Shares Child Care Case?**

Yes. If Yes, please provide your case number \_\_\_\_\_ (required)  No. If "no," please fill out the following information:

List of All Adults in Household					
First Name / Last Name	Age	Male/Female	Currently Working?	Current Health Insurance?	Pregnant?
		M / F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		M / F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
List of All Children in Household					
First Name / Last Name	Relationship to Household Adults	Age	Male/Female	Current Health Insurance?	
			M / F	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			M / F	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			M / F	<input type="checkbox"/> Yes <input type="checkbox"/> No	
			M / F	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Household's Total Gross Income Per Month		OR	Total Hours worked per week	Amount made per hour	
\$				\$	
How much do you pay for rent OR mortgage and property taxes total per month?		Do you have a monthly heating bill?		How much do you currently pay for court-ordered child support?	
\$		<input type="checkbox"/> Yes <input type="checkbox"/> No		\$	

## Client Consent & Confidentiality Agreement

I, \_\_\_\_\_, hereby give my permission that the Boys & Girls Clubs of Greater Milwaukee Family Resource Center staff may view, share and receive personal information regarding my eligibility for Wisconsin State & Federal entitlement programs, including but not limited to BadgerCare Plus, FoodShare and Wisconsin Shares Child Care. I consent to the disclosure and exchange of my information between the Boys & Girls Clubs personnel, the Wisconsin Department of Health Services, and the Wisconsin Department of Children & Families. I authorize the Boys and Girls Clubs to retain my ACCESS log-in and password and understand that my personal information will be kept confidential. I understand that this consent is valid up to one year after the service has been rendered.

Signature (Required): \_\_\_\_\_ Date: \_\_\_\_\_