



**VACAVILLE NEIGHBORHOOD
BOYS & GIRLS CLUB**

**MEMBERSHIP APPLICATION
2021-2022**

Date Received:
Received By:
Payment Received: Cash Check CC \$ _____

CLUB MEMBER INFORMATION

Last Name:	First Name:	MI:	Date of Birth:
Home Address:	City:	Zip:	Gender: M F
Grade Level for 202-2021: K 1 2 3 4 5 6	School Attending:	Returning Club Member: <input type="checkbox"/> YES <input type="checkbox"/> NO	

GUARDIAN INFORMATION

Parent/Guardian Last Name:	Parent/Guardian First Name:	Main Phone:	Work Phone:
Employer:	Title:	Cell Phone:	Current Email:
Parent/Guardian Last Name:	Parent/Guardian First Name:	Main Phone:	Work Phone:
Employer:	Title:	Main Phone:	Current Email:

EMERGENCY CONTACT INFORMATION

Emergency Contact:	Phone Number:
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Club Member Sign Out Authorization

Authorized:	5.)
1.)	6.)
2.)	Unauthorized: (Circumstances may warrant corroborating documents)
3.)	1.)
4.)	2.)

It will be required that all Individuals show proof of identification upon signing Club Member out of programming.

WALKER AUTHORIZATION

Because our Centers are located within neighborhoods of many children, the Vacaville Neighborhood Boys & Girls Club allows members to walk home. Members may walk home although they are advised to stay at the Centers and we cannot legally require them to stay. It is the responsibility of the child AND parent/ guardian to determine if walking home is an appropriate departure method.

____ Member may walk home ____ Member requires pick up

Medical Information

Please list medical conditions:	List any medications taken:
Allergies:	Learning Impairments:
Physician Name/Phone:	Health Insurance Group #:



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PARENT OR GUARDIAN APPROVAL OF MEMBERSHIP (Please read, check and sign below):

- I understand my child is free to come anytime the Club is open and is required to check in and check out of the Club. If my child chooses to leave they will not be permitted to return. It is the responsibility of me and my child to determine whatever arrival and departure method is the best for us.
- Liability Release: I, undersigned, am the legal guardian of the above named child and hereby give my child permission to participate in activities at The Vacaville Neighborhood Boys & Girls Club (VNBGC). I understand that this is not a licensed childcare facility. I will not hold the VNBGC responsible for any actions, accidents, injuries or losses, which may occur as a result of my child's participation in this program. I agree to indemnify and hold harmless the VNBGC, Board of Directors, officers, staff and its agents, and the City of Vacaville from all liability, which may occur as a result of my child's participation in VNBGC programming.
- I authorize Club personnel, EMT, physician, or hospital to administer emergency medical treatment in the event of an accident or sudden illness.
- I understand my child will be required to do academics while at the Club.
- I give my child permission to participate in the Club's activities within or near the Club's facility.
- I hereby give permission to my child to utilize computer equipment and the internet at the VNBGC. I understand that my child must follow club computer rules in order to maintain this privilege. I also am liable for replacing equipment or software if my child damages and/or makes the equipment useless.
- I give my consent and allow my child to be photographed and their picture, without identification, may be used for promotional purposes.
- I voluntarily submit my child in programs and I understand that prevention based programming is available for my child at the Club. A trained staff member has my permission to discuss, at a level determined to be age appropriate, the following subject matters: drugs and alcohol, chemical abuse, human anatomy, mental health issues, interpersonal relationships, and values clarification.
- I revoke my rights to any scholarship provided by VNBGC, in the event that volunteer hours are not completed.
- I understand that if my child is picked up after closing time, I will be charged a late pick-up fee of \$1 per minute any child left 30 minutes after the Club is closed is by law considered abandoned and must be reported to the authorities, who will then pick up the child.
- I agree to notify the VNBGC if there are changes in the members information.
- I give my permission to the VNBGC to use my child's school data for the purpose of Club assessments/surveys
- I authorize travel on the city transit system, in the Club van, or on a chartered bus during programming hours for the purpose of a fieldtrip and/or operational purposes. I understand that the VNBGC can revoke my child's ride privileges at any time and that VNBGC is not liable for any injuries that may occur while transporting/traveling.
- I have received and read a copy of the parent/member handbook.

I have read the information above and give my consent and authorization for my child to join the Vacaville Neighborhood Boys & Girls Club.

Signed by Parent/Guardian: _____ Date: _____



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**REQUIRED PRIOR TO ENROLLMENT
Community Development Block Grant Program
(2021 – 2022)**

*The service being provided to you receives funding from the City of Vacaville's Community Development Block Grant (CDBG) program. The U.S. Department of Housing and Urban Development (HUD) administers the CDBG program and monitors the City as to the head of household, income, disability, race and ethnicity of program service recipients. The information being requested is not meant for public dissemination but only for monitoring or audit purposes as required by HUD. Thank you for your cooperation. **This form is also used to qualify families for scholarships. Parents/guardians interested in scholarship assistance must also provide past 30 days of wage statements and a copy of the 2020 tax return.***

1. Total Annual Household Income: _____

2. Number Of People In Household: _____

3. Single Parent Household: ___ Yes ___ No

4. Head of household: ___ Male ___ Female ___ Both

5. Disabled: ___ Yes ___ No

6. Race and Ethnicity (please check the ethnicity of the child enrolled):

- | | |
|---|---|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Latino/Hispanic |
| <input type="checkbox"/> American Indian or Alaska Native & White | <input type="checkbox"/> Native Hawaiian/Pacific Islander |
| <input type="checkbox"/> Am. Indian or Alaska Native & Black or African Am. | <input type="checkbox"/> White |
| <input type="checkbox"/> Asian | <input type="checkbox"/> African American & Asian |
| <input type="checkbox"/> Asian & White | |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Other (specify): _____ |
| <input type="checkbox"/> Black or African American & White | |

7. Is the Parent or Guardian Military Active: ___ Yes ___ No

8. Is the Child Living on Base: ___ Yes ___ No



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CONSENT FORM FOR RELEASE OF INFORMATION

I, _____, the parent or legal guardian of _____, grant permission and authorize staff of the Vacaville Neighborhood Boys and Girls Clubs to obtain school records, grade reports, and access to school loop by signing my signature below.

I also grant permission to the staff of the Vacaville Neighborhood Boys and Girls Clubs to speak to teachers, counselors, and administrators to exchange information regarding the above named child. The purpose of the exchange is to help both organizations work together to help the student be successful in school, at the Club, and in the community. This release is valid for one year and may be revoked at any time by contacting the Vacaville Unified School District or the Vacaville Neighborhood Boys and Girls Club in writing.

Parent Signature

Date

Name of Student

Student's School