



Date Turned In: \_\_\_\_\_ Date in MTS: \_\_\_\_\_ Entered by: \_\_\_\_\_ Fee Paid: Yes No

## Teen Center Registration – Simms Club

### Teen's Information

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

Address: \_\_\_\_\_ City/County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Age: \_\_\_ Sex (circle): M F School: \_\_\_\_\_ Grade: \_\_\_\_\_

Ethnicity:  African American  Asian  Caucasian  Hispanic  Multi-Racial  Middle Eastern

Native American  Pacific Islander  Other **If other, please specify:** \_\_\_\_\_

Does this child qualify for the free or reduced lunch program? Please circle: Free Reduced Neither

New Member: Yes/No T-shirt size (adult sizes only): \_\_\_\_\_

### Parent/Guardian Information *(This section is for the adults who have primary custody of the teen.)*

Parent/Guardian Name: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Relation to teen: \_\_\_\_\_ Address (if different): \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Relation to teen: \_\_\_\_\_ Address (if different): \_\_\_\_\_

In an emergency, which parent/guardian should be contacted first? \_\_\_\_\_

### Household Information *(This information is required for grant purposes **only** and is kept **strictly** confidential.)*

How many residents in the house are 18 years or older? \_\_\_ How many under 18? \_\_\_ Total #: \_\_\_

Annual Household Income: \$\_\_\_\_\_ Type of housing:  Own  Rent  Public  Subsidized

Please check all statements that are true about the teen's household:

\_\_\_ lives with single parent/guardian (please circle one: mother father )

\_\_\_ lives w/ both parents or w/ a parent and step-parent (please circle one: step-mom step-dad)

\_\_\_ lives with legal guardian (please describe relation to teen: \_\_\_\_\_)

### Emergency Contacts/Health Info *(Must be different from the parents/guardians listed above.)*

Contact's Name: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Relation to teen: \_\_\_\_\_ Is this person authorized to pick up the teen?  Yes  No

Contact's Name: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Relation to teen: \_\_\_\_\_ Is this person authorized to pick up the teen?  Yes  No

Does your child have any allergies/food intolerances? (list): \_\_\_\_\_

Does your child have permission to be given sunscreen from staff when needed?  Yes  No

\*Does your child have any medications they will need to take during club hours? (list): \_\_\_\_\_

*\*If the teen must take regular medications during club hours, parents/guardians should include an official authorization for medication from the teen's physician.*

## Teen Center Policies and Rules

### Who is eligible to join the Club?

- The teen center is open for students ages 13-18.
- Students over age 18 may join teen center if they are still enrolled in public school.
- **Persons over age 18 who are not enrolled in school may not join teen center.**

### Open-Door Policy

- The Club operates on an **open-door policy** for all members, meaning that members are allowed to come at any time throughout the day. Once the teen leaves the center, they may not return later in the day unless granted special permission from staff. The Club only supervises teens as they remain in the building.
- The Club assumes no responsibility for members who choose not to come on a particular day or who choose to leave early.
- If parents/guardians wish for their child to remain in the club at all times, they must instruct him/her not to leave. If parents/guardians do not wish for their child to walk or take the transit home, arrangements should be made to pick up the teen by close.

### Entering and Exiting Teen Center

- Teens must sign-in using the sign-in sheet on the teen center front desk.
- When leaving, teens should notify a staff member that they are leaving for the day.
- Teens may not return to the club after leaving, unless given permission by staff that day.
- Teens must remain in areas where teen center staff supervision is present. Teens may not loiter in hallways or in unattended areas of the Simms building.

### Membership and Fees

- Membership for the Club lasts for one year calendar year.
- New members must submit the completed registration form on their first day in the Club.
- Returning members will submit new forms at the beginning of the school year.
- Members must pay a **\$15.00 registration fee** at the beginning of each school year.

### Club Hours

- The Club is open Monday-Friday from 2:45 PM to 7:00 PM.
- If Harrisonburg City Public Schools are closed for weather, the club is closed as well.
- During scheduled school closings, the club may have extended hours. Check schedules at [www.bgchr.org/teen-center](http://www.bgchr.org/teen-center) for information regarding teacher workdays, breaks, etc.

*By signing below, the parent/guardian and teenager both acknowledge understanding of teen center eligibility, the open-door policy, membership, fees, and club hours.*

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Parent/Guardian Signature

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Teen Signature

## Prohibited Behaviors

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- Profanity/Inappropriate Language
- Bullying/Harassment
- Violent Behaviors
- Defiant or Disrespectful Behaviors
- Possession of Tobacco
- Possession of Illegal Substances
- Possession of Weapons
- Vandalism and Theft

## Discipline Policy

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### Warnings

Teens will get ONE WARNING when they are behaving inappropriately. If they continue to act out, they will be given the option to make-up for their behavior through community service to the club that day or other alternative restorative practices. If the teen does not wish to perform community service, he or she will be suspended for the remainder of the day. If a suspension occurs after 5:00 PM, the teen will be suspended for the following day as well. Parents will be contacted in the event of a suspension.

If a teen has been suspended multiple times and continues to have behavioral issues, a longer suspension will be issued. In these cases, parents will be notified of the date that the teen is allowed to return to the center.

### Strikeouts

A “strikeout” behavior is an extreme behavior that will result in automatic suspension with no warning. If a teen’s behavior is extremely inappropriate, he or she will be sent home for the day and additional days may be added depending on the severity of the behavior. Once again, if a suspension occurs after 5:00 PM, the teen will be suspended for the following day as well.

**Strikeouts will be given for:**

- Hate speech, sexual harassment, or extreme/repetitive instances of bullying
- Threats of violence or serious physical fights such as fist fights
- Second instance of possession of tobacco or cigarettes
- Possession of weapons on club property
- Use of tobacco or cigarettes on club property
- Attending the club under the influence of drugs or alcohol
- Vandalism or purposeful damage of property
- Theft of a member’s property or Club property

*By signing below, the parent/guardian and teenager both acknowledge understanding of the teen center’s Prohibited Behaviors and Discipline Policy.*

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*Parent/Guardian Signature*

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*Teen Signature*

## Boys & Girls Clubs of Harrisonburg and Rockingham Co. (BGCHR) Agreements

**Yes \_\_\_ No \_\_\_** I give permission for my child to be photographed, videotaped, and/or interviewed for us by the BGCHR and the BGCA in productions, marketing, training services, and other similar purposes. I understand that my child will receive no compensation or consideration for the release, and that I can revoke this right in the future in writing.

**Yes \_\_\_ No \_\_\_** I give permission for BGCHR to access my child's teachers, grades, report cards, and SOL scores for programs related to education.

**Yes \_\_\_ No \_\_\_** I give permission for my child to participate in Boys and Girls Club related surveys. This will include surveys related to programs as well as the National Youth Outcomes Initiative survey.

**Yes \_\_\_** If my son or daughter needs to be picked up due to illness, injury, or suspension, I will pick up my child or arrange to have them picked up within 30 minutes.

**Yes \_\_\_** I understand that the Club, its employees and agents shall not be responsible/legally liable for losses of personal property or for bodily injury incurred by the member while at the Club or on field trip.

**Yes \_\_\_** I give my consent to have Club personnel, a physician, an EMT or hospital administer emergency medical treatment in case of sudden illness or injury while participating in BGCHR programs. I understand that all reasonable efforts will be made to contact me in the event of such an emergency.

**Yes \_\_\_** I agree to voluntarily withdraw my teen from the program if there are persistent disciplinary problems which cannot be resolved through reasonable efforts of the staff.

**Yes \_\_\_** I agree to pay for any damage to the building and/or equipment used or owned by BGCHR which is caused by my teen, other than times which are clearly the result of an unavoidable accident.

**Yes \_\_\_** I agree that my teen may accompany BGCHR staff on short, small group field trips within the neighborhood by walking without formal notification.

**Yes \_\_\_** I understand that there is a **\$15.00** annual membership fee charged for the teen center, and that I will be asked to pay for the cost of fields trips for my teen.

**Yes \_\_\_** I give permission for BGCHR to receive and/or release pertinent information from and/or to schools, social services agencies, mental health providers, and other related agencies concerning my child. I understand that this information will be used with discretion and as an aid in determining appropriate programs for my teen.

**Disclaimer:** The Boys and Girls Clubs of Harrisonburg and Rockingham County (BGCHR) are not responsible or liable in any way in the event of harm or injury occurring to the member. It is agreed that the parent or guardian will not hold BGCHR responsible for the welfare or whereabouts of the member. If the parent or guardian does file a complaint against the Club, the parent or guardian agrees to pay for BGCHR legal fees. I hereby give permission for my child to become a member of BGCHR. I certify that I am the child's guardian and have full power, right, and authority to enter into this release on behalf of the child and understand all its terms and provisions.

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*Parent/Guardian Printed Name*

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*Parent/Guardian Signature*