



2020/ 2021 MEMBERSHIP APPLICATION

Program Fees are due the 1st of each month. Please note a \$25.00 late fee will apply per child if paid after the 5th.

PROGRAM FEES

★ MONTHLY PROGRAM

Open: 8:00 am – 5:00 pm
Catlin Club Only Open 7:30 am– 4:30 pm
Monday – Friday- \$750/Month
Monday/Wednesday/Friday - \$555 /Month
Tuesday/Thursday - \$420/Month

Child safety is our #1 priority. Under no circumstances shall any of our membership requirements and best practices be compromised. BGC/GCV adheres to all safety guidelines, including current *CDC guidance for childcare* as well as any

Program

- Monday - Friday
- Mon/Wed/Fri
- Tues/Thurs

School Cohort

- Cohort A
- Cohort B

CLUB LOCATIONS

- AC Stelle... Closed
- Anderson Club... (805) 493-2917
- Catlin Club... (818) 735-9518
- Grossman Club ... (818) 224-3097
- Jefferson Club ... (818) 225-8660
- Johnston Club ... (805) 449-1309
- Marley Club– Closed
- Morton Club... (805) 375-5635
- Notter Club ... (805) 371-4045

MEMBER INFORMATION

Name (Last) _____ (First) _____ (Middle) _____ Male Female

Date of Birth ____/____/____ School _____ New Member Returning Member

Grade _____ Age _____ Other Family Members Attending/Attended Club _____

MOTHER/GUARDIAN INFORMATION. Check if this is the Member's primary residence.

Name _____ Employer _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell _____ Work _____

Mother's Email:

(BGC/GCV sends important Club activity information, plus Club Newsletter)

FATHER/GUARDIAN INFORMATION. Check if this is the Member's primary residence.

Name _____ Employer _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell _____ Work _____

Father's Email:

(BGC/GCV sends important Club activity information, plus Club Newsletter)

EMERGENCY CONTACT

#1 – Emergency Contact _____ Relationship to Member _____

Best Contact Number _____ home cell work

#2 – Emergency Contact _____ Relationship to Member _____

Best Contact Number _____ home cell work

MEDICAL INFORMATION

Name of Doctor _____ Doctor's Phone Number _____

Health Insurance Company _____ Policy and Certificate # _____

Medical Restrictions (allergies, necessary medications, sports restrictions, etc.) _____

ETHNICITY

- African American
- Asian
- Caucasian
- Hispanic
- Native American
- Other _____

ANNUAL HOUSEHOLD INCOME:

- \$10,000 or below
- \$10,001 - \$20,000
- \$20,001 - \$30,000
- \$30,001 - \$40,000
- \$40,001 - \$50,000
- \$50,001 - \$60,000
- \$60,001 +

DOES YOUR CHILD RECEIVE FREE OR REDUCED LUNCH:

- Yes No
- MILITARY: Yes No
- Head of Household: _____

How many live in your household: Under 18 _____ Over 18 _____ Over 65 _____

PARENT/GUARDIAN AUTHORIZATION FOR THE BOYS & GIRLS CLUBS OF GREATER CONEJO VALLEY

- In the event of an emergency, I authorize the Club to seek medical attention and transportation for my child if deemed necessary.
- I hereby give permission for my child to become a member and participate in activities of the Boys & Girls Clubs of Greater Conejo Valley. My child promises to take care of their Club and its property and to follow Club rules, including appropriate use of technology and personal devices while at the Club.
- I expect my child to stay at the Club until picked up: Yes No
- I give permission for my child to be transported to and from program areas, on field trips, and in the case of an emergency.
- I give permission for my child to walk within a one-mile radius of the Clubhouse with a staff member for various Club activities.
- I understand BGC/GCV will periodically show movies rated PG-13 or lower and play T rated video games.
- I understand the BGC/GCV retains the right to use photographs, slides or video-taped material of my child taken during activities for promotional purposes and waive all rights for compensation.
- I understand the Club is not responsible for my child's personal belongings and will advise my child to leave valuables at home.
- I give permission for the release and exchange of confidential information from the Conejo Valley Unified School District or Las Virgenes Unified School District in order to provide programs and coordinate services for my child. I understand that my records are protected under federal confidentiality regulation and cannot be disclosed without my written consent unless otherwise provided for in the regulations.
- I agree to defend, indemnify and hold harmless the BGC/GCV, Conejo Valley Unified School District, Las Virgenes Unified School District and their officers, employees and agents against any and all loss, liability charges, expense (including attorney fees) and costs of whatsoever character which may arise by reason of participation in any program.
- Boys & Girls Clubs of Greater Conejo Valley has put in place preventative measures to reduce the spread of COVID-19; however, the Club **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Club, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Club program.
- I understand there will be a late fee of **\$15.00 per member** for each 15-minute increment used after the club closes. The Police Department will be asked to watch your child if we have not heard from the parent/guardian after 1 hour of the club closing.
- I understand the BGC/GCV Parent Handbook is available on our website at www.bgcconejo.org, and that it is my responsibility to read this Parent Handbook, become familiar with its contents, and abide by the program requirements and parent responsibilities outlined in it.
- I understand that the Boys & Girls Club of Greater Conejo Valley is not responsible for any staff outside of club duties.
- Wellness checks will be conducted at the entrance of the Club with temperature checks for both staff and members upon arrival.
- Outside parent drop off and pick up are required.
- All staff and members must wash their hand upon entering the site.
- All program areas and high touch surfaces are disinfected after each group.
- Staff and members are to wash their hands after each activity.
- Staff and members must maintain social distance protocols. - If a member does not comply with social distancing, they will not be able to attend Club.
- Anyone who develops symptoms will be isolated in a room separate from others and sent home.
- If your child is feeling sick, you agree to pick them up within 60 minutes of notification.
- Any member feeling sick will not be admitted to Club.
- Unused days will not be refunded or transferrable.
- All members and staff are required to wear masks

Print Name of Parent/Guardian: _____ Best Contact Number: _____

Signature of Parent/Guardian _____ Date: _____

PLEASE VISIT OUR WEBSITE, www.bgcconejo.org to learn about activities and events at our Clubs and if you or someone you know would like to make an on-line donation to the Boys & Girls Clubs of Greater Conejo Valley.

Financial Assistance is available on a case-by-case basis. A confidential 'Request for Financial Assistance' is required to be completed. Requirements include: Total income of household members, previous year's tax returns, and most recent form of income.

CLUB USE ONLY	
Club Location: _____	Club ID Number: _____
Entered into Daxko by: _____	Date Entered into Daxko: _____
Date Membership Paid: _____	Amount Paid: _____ Receipt #: _____