

Confidential Information

The following is necessary for our records and the funding our organization receives. The answers you provide are confidential. Your cooperation in providing this information is both appreciated and necessary.

Combined household income is: under \$20, 000 under \$50,000 over \$70,000
 under \$30, 000 under \$60,000
 under \$40,000 under \$70,000

Does this member receive FREE lunches at school? Y N if not FREE, Do they receive Reduced price? Y N

HEALTH: Does your family have accident insurance? Y N * List all medicine child is taking _____

Hospital / Doctor you use: _____ Are you eligible for dependant medical treatment on Post? Y N

If you have any serious medical problems/conditions/handicaps, explain in detail: _____

Acceptable Use Policy for Technology

It is the general policy of BGCCT that all club computers and internet services are to be used in a responsible, efficient, ethical, and legal manner in accordance with the mission of the Club. Use of Club computers and/or internet services is a privilege, not a right. Failure to adhere to this policy and administrative procedures may result in suspension or revocation of the privilege. Willful or intentional misuse/damage could lead to disciplinary action or criminal penalties under applicable state and federal laws. I will limit my BGCCT technology equipment and internet service use to those specific activities for which I have received permission from the lab instructor in advance. I will not retrieve or send unethical, obscene, harassing, illegal, immoral, or simply inappropriate or unacceptable information of any type; I will not use the telecommunications access provided by BGCCT for illegal purposes of any kind. I will not share my home address, phone number, email address, or password with another user for any purpose. I understand that I am not to access my personal e-mail account or engage in any online chat, unless given express permission by Club staff; nor am I to use any other person's account. Use of any/all personal items on Club computers (hardware or software) without advance permission from the BGCCT lab instructor is prohibited. I understand that information received online is private property and/or copyrighted, unless specified. I will not plagiarize information in any form. I will not attempt to bypass the security built into any level of the computer system, and I recognize that doing so will result in immediate cancellation of my privileges. I will not damage any computer or steal any pieces of the lab equipment. I understand that I will be responsible for replacement and/or repair costs beyond fair wear and tear use. By signing this Waiver and Consent, I understand and agree that BGCCT will not be held responsible if I participate in such activities and such participation will result in disciplinary action. I will adhere to the BGCCT Acceptable Use Policy for Technology at all times. I understand my responsibility as a user of BGCCT computer lab equipment. I have read the above rules and realize that any infraction will cancel my user privileges and may result in further disciplinary action. I will immediately report anyone I observe breaking this policy to the BGCCT computer lab instructor. I understand that my child will have access to club computer equipment and internet use and they will be held accountable for violation of the above rules. I understand and will follow the above rules as stated.

PARENT/LEGAL GUARDIAN NAME PRINTED: _____ DATE : _____

PARENT/LEGAL GUARDIAN SIGNATURE: _____ MEMBER'S SIGNATURE: _____

Swimming Permission form/release of liability (if applicable at location)

I, the parent/guardian of the member understand that swimming is a hazardous activity. I recognize there are risks inherent in the activity of swimming, including but not limited to paralyzing injuries and death. The parent/guardian of the member hereby agrees to allow said member to participate in swimming activities at the Boys & Girls Club and hereby agrees to indemnify and hold harmless the Boys & Girls Clubs of Central Texas, its directors, employees and volunteers against any liability resulting from any injury that may occur to the member while participating in Club activities including swimming. The parent/guardian also agrees to indemnify Boys & Girls Clubs of Central Texas for any damages incurred arising from any claims, demand, action or cause of action by the member. Further, the parent/guardian agrees to pay all costs associated with medical care. ***I have read the above swimming liability release and sign it with full knowledge of its content and significance.***

PARENT/LEGAL GUARDIAN SIGNATURE: _____ DATE: _____

***** PARENT PERMISSION *****

My child is joining Boys & Girls Clubs of Central Texas with my permission. I understand that the club is an open-campus and not responsible for the time or manner in which he/she may arrive at or leave the club, and that BGCCT is not responsible for injury, medical expense, or loss of personal property while this member is participating in club activities. If, in the opinion of BGCCT staff, my child has a medical emergency, I give my permission for him/her to be examined/treated by licensed medical personnel at my expense. An ambulance may be called if deemed necessary for transportation. I give my express permission for my child to be transported to BGCCT events by club or private transportation. By signing below, I also give my express permission for my child to be videotaped or photographed for publicity purposes. I agree to be financially responsible for any/all club equipment checked out by my child and not returned to the club in a timely manner. I agree to furnish transportation for my child to leave the club before the posted closing time for any given club day (or) to have a signed PARENTAL PERMISSION TO LEAVE OUTSIDE AT CLOSING form on file with club director. I understand that the BGCCT has a late fee of \$.50 per minute and after a youth has been left for 30 minutes after closing time, the proper authorities will be contacted unless there is a PARENTAL PERMISSION TO LEAVE OUTSIDE form on file. I understand that BGCCT is a drug/alcohol free zone and that persons who violate this policy will be dealt with sternly I give permission for the BGCCT to make and retain copies of my child's (or ward's) report cards and/or progress reports in order to better understand the academic needs of my child (or ward) and to better assist him/her in his/her educational pursuits. I understand that copies made of report cards and/or progress reports will remain confidential and will only be viewed by BGCCT staff. I understand the Club may charge additional program fees including an additional summer program fee. I understand that certain units of the Boys & Girls Clubs of Central Texas may be designated for teens only and/or for youth 7-12 or 6-18 years old (age varies by club location, please check with your club) BGCCT IS NOT A LICENSED DAYCARE. I have received a copy of the club rules and will cover them with my child. If my child is suspended for any reason, I will not expect the return of any dues/fees that I have paid to the club.

PARENT/LEGAL GUARDIAN SIGNATURE: _____ DATE: _____

MEMBERS SIGNATURE _____ DATE: _____