

# 2023-2024 WBGC Afterschool Registration Packet

Dear Parent / Guardian,

Please be sure to return all items listed below in order to register your child for membership.

- ☐ Membership Form
- ☐ Code of Conduct Agreement
- ☐ Health Form
- ☐ COVID-19 Liability Waiver
- ☐ School Communication Form
- ☐ \$25.00 School Year Membership Fee

If you have any questions please contact us at [info@watertownbgc.org](mailto:info@watertownbgc.org) or 617-926-0968. Thank you!



Blank page (for 2 sided printing)

MEMBER INFORMATION					<input type="checkbox"/> New	<input type="checkbox"/> Renewal
Child First Name:	Middle	Child Last Name:	Nickname:	Date of Birth (MMDDYYYY)	Age:	
Address:						
no.	street	city/town		state	zip	
School:	Current Grade:	Preferred Pronouns:			Preferred Name:	

### 1ST PARENT / GUARDIAN INFORMATION (PRIMARY CONTACT)

[illegible]

## 2ND PARENT / GUARDIAN INFORMATION

<b>First Name:</b>	<b>Last Name:</b>
<b>Relationship to Member (circle):</b> Mother   Father   Step-Parent   Aunt / Uncle   Sister   Brother   Cousin   Grandparent   Foster Parent   Other: _____	
2 <sup>nd</sup> Parent/Guardian's Contact Numbers (in the order we should try to reach you):	
● 1st #: _____ ● 2nd #: _____ ● 3rd #: _____	
● Address (if different from member): _____	
● Employer: _____ Job Title / Occupation _____	
2 <sup>nd</sup> Parent/Guardian's Email:	

To add additional children for membership, please see the "Additional Members" page.

**IN CASE OF AN EMERGENCY, WE WILL FIRST CALL THE PARENTS / GUARDIANS LISTED ABOVE.**

***If they cannot be reached, we will call the following people (in the order listed below).***

Name	Relationship to member	Emergency Contact Phone Number

***Please complete and sign the reverse side of this registration form.***

## Watertown Boys & Girls Club's Mission:

*to inspire and enable all young people,  
especially those who need us most,  
to realize their full potential as  
productive, responsible and caring citizens.*

<h2 style="text-align: center;">Watertown Boys &amp; Girls Club's Mission:</h2> <p style="text-align: center;"><i>to inspire and enable all young people, especially those who need us most, to realize their full potential as productive, responsible and caring citizens.</i></p>	<b><u>FOR OFFICE USE ONLY:</u></b>		<b><u>Moneytrax</u></b>
	Application Received by: _____ Date: _____ FEE: \$ _____		Date: _____
	<input type="checkbox"/> CHECK # _____	<input type="checkbox"/> CASH <input type="checkbox"/> W by _____	Staff: _____
	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/> BIDDY <input type="checkbox"/> WAVEMAKERS <input type="checkbox"/> OTHER _____			
Input completed on _____ by _____ Exceptions on application: _____			
<input type="checkbox"/> CADET <input type="checkbox"/> JUNIOR <input type="checkbox"/> TEEN		Membership Number _____	
Card issued on: _____ by: _____ Replacement(s): <input type="checkbox"/> on _____ <input type="checkbox"/> on _____			

My child \_\_\_\_\_ (child's name)

may join Watertown Boys & Girls Club (the Club) and participate in the activities offered at the Club.

**DEMOGRAPHICS—Your responses to the elements below are kept CONFIDENTIAL and are crucial for funders and help us keep membership fees low by securing donations and grants.**

<b>Household Type:</b> <input type="radio"/> Rent <input type="radio"/> Own <input type="radio"/> Watertown Housing Authority <input type="radio"/> Other Public Housing <input type="radio"/> Other: _____ <b>Language most used at home:</b> _____	<b>Family Setting:</b> <input type="radio"/> Both Parents <input type="radio"/> Aunt / Uncle <input type="radio"/> Single Parent : <input type="radio"/> Grandparents(s) Lives <input type="radio"/> Foster Parent(s) with: _____ <input type="radio"/> Other	<b>Total Family Size:</b> (includes parents, children, anyone living in home) (Check One:) <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 or more Number of Siblings: _____	<b>Does your family currently qualify for any of the following (check all that apply):</b> <input type="radio"/> SNAP <input type="radio"/> WIC <input type="radio"/> TEFAP <input type="radio"/> Other  <b>Is a member of your immediate family currently serving active military duty?</b> <input type="radio"/> Y <input type="radio"/> N		
<b>Race (check all that apply):</b> <input type="radio"/> American Indian or Native American <input type="radio"/> African American / Black <input type="radio"/> Asian <input type="radio"/> Caucasian/White <input type="radio"/> Hispanic/Latino <input type="radio"/> Native Hawaiian/Pacific Islander <input type="radio"/> Other _____ <input type="radio"/> Unknown					
<b>Ethnicity (check all that apply):</b> <input type="radio"/> American <input type="radio"/> Armenian <input type="radio"/> Brazilian <input type="radio"/> Haitian <input type="radio"/> Irish <input type="radio"/> Middle Eastern <input type="radio"/> Portuguese <input type="radio"/> Russian <input type="radio"/> Other _____					
<b>Household Annual Income – Select the range that best fits</b>					
<input type="checkbox"/> \$0 - \$10,000	<input type="checkbox"/> \$10,001 – \$20,000	<input type="checkbox"/> \$20,001 – \$30,000	<input type="checkbox"/> \$30,001 – \$40,000	<input type="checkbox"/> \$40,001 – \$50,000	<input type="checkbox"/> \$50,001 – \$60,000
<input type="checkbox"/> \$60,001 – \$70,000	<input type="checkbox"/> \$70,001 – \$80,000	<input type="checkbox"/> \$80,001 – \$90,000	<input type="checkbox"/> \$90,001 – \$100,000	<input type="checkbox"/> \$100,001 – \$110,000	<input type="checkbox"/> \$110,001 – \$120,000
<input type="checkbox"/> \$120,001 – \$130,000	<input type="checkbox"/> \$130,001 – \$140,000	<input type="checkbox"/> \$140,001 or over	<input type="checkbox"/> Other: _____	<input type="checkbox"/> I choose to leave this section blank	

**Would you like to include a donation toward one of the following for a child who may not be able to afford the Club otherwise?**

☐ General Donation   ☐ Club Membership   ☐ Camp Scholarship

**AMOUNT TO BE INCLUDED: \$\_\_\_\_\_ Thank you for your generosity!**

**CONSENTS: please circle Yes (Y) or No (N) and initial**

**Surveys and Questionnaires** - I, the parent/guardian of the minor child listed on the application, give permission for Watertown Boys & Girls Club (WBGC) to survey my child about his or her Club experience and behaviors, skills and attitudes using Boys & Girls Clubs of America's (BGCA) Outcome Measurement Tool Kit or other survey instruments. I give my permission to WBGC to share information about my child with BGCA or other program partners for research purposes and/or to evaluate the program's effectiveness. All information shared will be kept confidential, shared via de-identifying data or sharing information in aggregate.

**Y / N**  
**Please initial: \_\_\_\_\_**

**Transportation** - I understand that my child may be transported in the Club's vans or associated vehicles to and from Club related events.

**Y / N**  
**Please initial: \_\_\_\_\_**

**Public Relations Materials** - I, the parent/guardian give permission for the minor child listed on the application to have their picture and/or name in newspapers, newsletters, and/or any other promotional materials for WBGC, as well as audio or video records, and for use or distribution in other non-WBGC publications, electronic or otherwise. I also agree to allow WBGC to use photographs, audiotapes, video records or other work produced by my minor child for publicity purposes. I hereby waive any right to royalties or other compensation arising therefrom.

**Y / N**  
**Please initial: \_\_\_\_\_**

**WAIVER: please sign at bottom**

**Parent Release** - I, the parent/guardian of the minor child listed on the application, for ourselves, our heirs, executors and administrators, hereby release, waive, acquit and forever discharge the WBGC, and BGCA, their representatives, successors, insurers, assigns or any other person or entity associated with any of the above Organizations such as staff, directors or volunteers, from all liability, claims, demands, or causes of action for any and all loss, damage, injury or death and any claim of damages resulting from use of facilities owned or controlled by the above organizations, or participation in activities of said organizations either at or away from the Club. I understand the Club is not, nor claims to be, a licensed day care center. I have read and understand the policies listed in the "Club Policies and Member Expectations" packet.

**Medical** - In the event of injury, or should emergency care be required and I cannot be reached, I authorize staff from Watertown Boys & Girls Club to sign for emergency medical attention for my child.

**Disclaimer** - I certify that the application is factual and complete to the best of my ability. I hereby give permission for my child listed on the application to become a member of WBGC and participate in the activities offered at the Club. I have read a copy of Watertown Boys & Girls Club's "Policies and Member Expectations" to review with my child and I understand that my child's failure to comply with the rules of the Club may result in temporary suspension and/or cancellation of membership with no refund of fees. If my child's membership card is lost, I understand the replacement fee for a new card is \$2.00. I understand the Club is not responsible for personal injury or loss of personal property and that I will be financially responsible for any intentional damage or vandalism to the Club caused by my child. It is understood that the code of conduct will be adhered to and a member's failure to comply may result in membership termination.

**Release and Covenant Not to Sue:** In consideration for allowing my child to participate in activities provided, hosted, or sponsored by or otherwise affiliated with or connected to Watertown Boys & Girls Club (the "Activities"), I agree to indemnify, release, hold harmless, forever discharge and covenant not to sue Watertown Boys & Girls Club and any of its directors, overseers, officers, trustees, employees, agents, affiliates, successors and assigns, and to absolve them from any and all liability for any claim or suit, of any kind or nature, arising out of my child's participation in the Activities whether or not such Activities are on the premises of Watertown Boys & Girls Club or elsewhere.

**Member Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent / Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

*\*Your signature confirms that all information provided above is true and accurate*

**25 Whites Avenue / Watertown, MA 02472 / 617-926-0968 / info@watertownbcg.org**

## 2023-2024 Membership Registration: Additional Members

This page is for adding additional children in the same household to a schoolyear membership.

MEMBER #2 INFORMATION					<input type="checkbox"/> New	<input type="checkbox"/> Renewal
Child First Name:	Middle	Child Last Name:	Nickname:	Date of Birth (MMDDYYYY)	Age:	
Address:						
no.	street	city/town	state		zip	
School:	Current Grade:	Preferred Pronouns:	Preferred Name:			

MEMBER #3 INFORMATION					<input type="checkbox"/> New	<input type="checkbox"/> Renewal
Child First Name:	Middle	Child Last Name:	Nickname:	Date of Birth (MMDDYYYY)	Age:	
Address:						
no.	street	city/town	state		zip	
School:	Current Grade:	Preferred Pronouns:	Preferred Name:			

MEMBER #4 INFORMATION					<input type="checkbox"/> New	<input type="checkbox"/> Renewal
Child First Name:	Middle	Child Last Name:	Nickname:	Date of Birth (MMDDYYYY)	Age:	
Address:						
no.	street	city/town	state		zip	
School:	Current Grade:	Preferred Pronouns:	Preferred Name:			

**BE GREAT**

## FOR PARENTS / GUARDIANS

### Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is extremely contagious** and has significant person-to-person spread. As a result, federal, state, and local governments and federal and state health agencies have recommended social distancing measures and have, in many locations, required ongoing prohibitions on the congregation of groups of people of various sizes.

Watertown Boys & Girls Club ("the Club") has put in place preventative measures to reduce the spread of COVID-19. These include, but are not limited to, social distancing, wellness monitoring, increased sterilization, required hand-washing, signage, etc. However, the Club **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. Further, attending the Club **could increase** your risk and your child(ren)'s risk of contracting COVID-19.

.....

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child (ren) and I may be exposed to or infected by COVID-19 by attending the Club and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Club may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Club employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at the Club or participation in Club programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the Club, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. 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.

By signing below I acknowledge that I have read the foregoing Assumption of Risk and Waiver of Liability and understand its contents; that I am at least eighteen (18) years old and fully competent to give my consent; that I have been sufficiently informed of the risks involved and give my voluntary consent in signing it as my own free act and deed on behalf of my child (ren) and myself; that I give my voluntary consent in signing this Assumption of Risk and Waiver of Liability as my own free act and deed with full intention to be bound by the same, and free from any inducement or representation.

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Signature of Parent/Guardian

Date

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Name of Parent/Guardian

Name of Participant (s)



# **Club Policies and Member Expectations**

## **REGISTERED DROP IN POLICY:**

Watertown Boys & Girls Club is a drop-in Youth Development facility. Supervision is provided for members INSIDE of the Club, and during occasional Club organized activities both outside and offsite.

We encourage all members to stay in the Club's supervised areas at all times. Different families have different rules for their own children regarding expectations about leaving the Club or staying inside of the supervised areas. We ask families to discuss these expectations to be sure each child knows their families rules about when they are allowed to leave the Club. **Please Note:** Club staff cannot be responsible for members that leave supervised areas and members should only leave the Club if they have permission from their parent/guardian. We cannot prohibit any child from leaving the building, so it is critical that you discuss your expectations with your child.

## **CLUB MEMBER EXPECTATIONS:**

- I will behave in a respectful manner to Club members, Club staff, volunteers, and visitors.
- I will behave with respect, fairness, kindness, and trustworthiness.
- I will respect all property belonging to myself, other people, and the Club.
- I will demonstrate a positive attitude and cooperate with Club staff and fellow Club members to respectfully work to resolve challenges in a positive manner.
- I will respect all cultures and individual differences equally.
- I will use appropriate language and good manners at all times.
- I will take responsibility for my choices and the results from making those choices.
- I will clean up after myself and do my part to keep the Club clean, organized, and safe of hazards.
- I will respect the boundaries of the Boys & Girls Club, staying on the property and only in open/designated Club areas.
- I will dress appropriately for Club Activities.
- I understand that the following behaviors are never appropriate and will not be tolerated: possessing illegal or dangerous items, physical violence, retaliation, profanity or foul language, bullying, stealing, lewd conduct, "hanging out" in restrooms or closed program areas, disrespectful attitude, not following staff directions, destruction of property, and verbal, physical, racial, or cultural harassment or discrimination.

**Member Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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

## **DISCIPLINE POLICY:**

The Club uses positive discipline techniques to encourage members to meet those expectations and abide by the Club's rules. Positive discipline techniques used at the Club include:

- Making rules and expectations clear.
- Modeling appropriate behavior
- Acknowledging and rewarding appropriate behavior
- Encouraging verbalization and problem solving by providing positive suggestions, choices, and redirections.

When a child does not meet the Club's behavioral expectations or abide by the Club's rules for members, the following steps may be taken:

- A staff member will complete an incident report and will discuss the incident with the child's parent.
- Staff will notify parents and a determination will be made if the child must be picked up immediately.
- A behavior agreement may be completed outlining the unacceptable behavior and consequences, which may include suspension or membership termination.

## **SUSPENSIONS:**

- Suspension is used in cases of accumulation of incidents or serious misconduct.
- Members may be suspended from the Boys & Girls Club for a period of 1-5 days.
- Before a member returns back to Club programming from a suspension period, a parent or guardian will need to accompany the member in person to a meeting with the Club Director.

## **MEMBERSHIP TERMINATIONS:**

- The child may be suspended or have their membership terminated for all Watertown Boys & Girls Club programs. Please note: depending on the severity of the behavior, suspension or membership termination may happen as soon as the first reported incident.

**Member Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Parent / Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_





# WATERTOWN BOYS & GIRLS CLUB

## 2023-2024 Club Member Health History

### Member and Parent/Guardian Information:

Member's Name:

Age:

Date of Birth:

/

/

Parent/Guardian's Name:

Home Phone:

Cell Phone:

Emergency Contact Name:

Telephone:

### Primary Care Physician Information:

Name of Primary Care Physician:

Phone Number of Primary Care Physician: ( ) -

### Medical Insurance Information:

Medical Insurance Carrier Company Name:

Policy Holder's First and Last Name:

Policy/ Group #:

### Allergy Information:

Insect bite: Yes No (circle one) **Reaction severity:** Mild Moderate Severe (Circle one)

Bee Sting: Yes No (circle one) **Reaction severity:** Mild Moderate Severe (Circle one)

Food: Yes No (circle one) **Reaction severity:** Mild Moderate Severe (Circle one)

Seasonal: Yes No (circle one) **Reaction severity:** Mild Moderate Severe (Circle one)

Medication: Yes No (circle one) **Reaction severity:** Mild Moderate Severe (Circle one)

Other: **Reaction severity:** Mild Moderate Severe (Circle one)

### Medical History (Please Circle Answer)

Has Your Child Been Diagnosed with any of the following:

**Asthma:** Yes No **Medication Taken?** Yes No **Seizure Disorder:** Yes No **Medication Taken?** Yes No

**Diabetes:** Yes No **Medication Taken?** Yes No **ADD/ADHD:** Yes No **Medication Taken?** Yes No

### Mental & Behavioral Health—Has your child be diagnosed or Treated for (Please Circle Answer):

Developmental delays: Yes No Does your child use an IEP at school Yes No

Behavioral disorders: Yes No Does your child have a 1:1 aid at school Yes No

If you answered "yes" to any of the following questions, please use the space below to share any important or helpful information with Club Staff to help us all have a successful school year at the Club:



# 2023-2024 School Communications Form

Child's First Name:	Child's Last Name:	Child's Preferred Name:	Date of Birth (MMDDYYYY):	Age:
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## SCHOOL COMMUNICATION

I give authorization for the Watertown Boys & Girls Club to communicate with Watertown Public Schools regarding my child. The purpose of this line of communication is for the Watertown Boys & Girls Club staff to better understand my child’s needs so we can best serve them. Discussed information would include academic needs, behavioral health, and other support needs.

Please sign this form in order to allow Watertown Boys & Girls Club staff to communicate about the above topics with Watertown Public Schools.

Parent / Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**BE GREAT**