



Boys & Girls Clubs
of South Coast BC

Club Membership Agreement

IMPORTANT INFORMATION

Please have this translated.

RENSEIGNEMENTS IMPORTANTS

Prière de les faire traduire.

重要資料

請找人為你翻譯

これはたいせつなお知らせです。

どなたかに日本語に訳してもらってください。

알려드립니다

이것을 번역해 주십시오

CHỈ DẪN QUAN TRỌNG

Xin nhờ người dịch hộ

ਜ਼ਰੂਰੀ ਜਾਣਕਾਰੀ

ਕਿਰਪਾ ਕਰਕੇ ਕਿਸੇ ਕੋਲੋਂ ਇਸ ਦਾ ਉਲੱਥਾ ਕਰਵਾਓ ।

INFORMACIÓN IMPORTANTE

Busque alguien que le traduzca.

اطلاعات مهم و سودمند

لطفاً از یک نفر بخواهید که برای شما ترجمه کند

IPO AY ISANG MAHALAGANG

PATALASTAS. Mangyaring ipasalin

ito kung hindi nauunawaan.



Date: _____

Club Membership Agreement: _____ Club

Club Member Information

Club Member's Name: _____
Last Name *First Name*

Gender: _____ Birthdate: _____ Age: _____ Grade: _____
Month / Day / Year

Household Information

Club Member's Primary Address: _____

City: _____ Province: _____ Postal Code: _____

Parent / Caregiver 1's Name: _____ Relation to Member: _____

Home Phone: _____ Cell: _____ Work Phone: _____

Email Address: _____

Parent / Caregiver 2's Name: _____ Relation to Member: _____

Home Phone: _____ Cell: _____ Work Phone: _____

Email Address: _____

Emergency Contact Information

Contact Name (Not a Parent/Guardian listed above): _____

Relationship: _____ Phone: _____

Additional Family Information

Member Currently Lives With: Mother Father Both Other (Please specify): _____

School Attending: _____

Family Status: Married Divorced Separated Common Law Single Parent

Widowed Domestic Partnership Other (Please Specify): _____

Custody: Mother Father Joint Grandparent(s) Guardian(s) Other (Please specify): _____

Additional Information about Club Member

Returning Club Member? Yes No If yes, has been a member for _____ years

Indigenous: Yes No Primary Language Spoken at Home: _____

Years living in Canada: Born in Canada 5 years or more Under 5 years

Method of Leaving Club: Parent Pick-Up Walk Bus Other (Please specify): _____

Please provide a list of people who would most commonly pick-up this member: _____



Club Member's Medical Information

Please outline any and all allergies your child has:

Indicate Type: Drug, Food, Environmental, Insect, Other	Allergen (please be specific)	Type & Severity of Reaction (indicate if life-threatening)	Management, Treatment/Medication	Date of Last Reaction

Does your child carry an epi-pen? Yes No If yes, for what allergy? _____

Does your child have any dietary restrictions? Yes No

If yes, please explain: _____

Are your child's immunizations up to date? Yes No Care Card / Medical Number: _____

Immunization details (if necessary): _____

Does your child experience any of the following?

- ADD/ADHD
- Asthma/Inhaler
- Behavioral Concerns
- Blackouts/Fainting
- Concussion
- Developmental Delays
- Epilepsy/Seizures
- Fetal Alcohol Syndrome
- Hay Fever
- Mental Health Concerns
- Motion Sickness
- Nose Bleeds

If yes to any of the above, please explain: _____

Please list any other medical conditions, disabilities, or behavioral concerns we should be aware of: _____

Health Acknowledgement

Staying home when you're sick is one of the most important ways to reduce the spread of communicable diseases. This is why it is important for anyone who is sick to stay home.

Participants should stay at home when symptoms of illness develop, such as:

- Fever
- Chills
- Cough
- Difficulty breathing (in children, this can look like breathing fast or working hard to breathe)
- Headaches
- Body aches
- Body aches
- Loss of sense of smell or taste
- Nausea or vomiting
- Diarrhea
- Sore throat
- Loss of appetite
- Extreme fatigue or tiredness



Staff will conduct a daily health screening for each participant upon arrival to the program. If there are concerns, staff will contact the parent/guardian.

If a participant displays any mild symptoms without fever, the participant should stay home and be monitored symptoms for 24 hours. They may return to program once symptoms resolve.

If a participant displays any symptoms during the program day, they will be separated from others and brought to the designated isolation room / area. Parents will be informed immediately for pick-up.

Participants who are experiencing symptoms of a previously diagnosed health condition do not need to stay home.

If a parent/guardian/participant is not able to adhere to health/hygiene measures, then the participant may be asked to be withdrawn from the program.

- By checking this box, I confirm that I have read and understand the Participant Health Policy outlined above

Club Member Behaviour Agreement

In order to help create a safe, positive Club environment, members are expected to follow all Club rules, and are asked to sign the following Club Member Behaviour Agreement:

BGC believes that all kids are amazing, and that you as a Club member are an important part of creating a positive Club environment for yourself and others. The 3 R's are our expectations for all Club members, and by signing below you are agreeing to follow them.

3 R's: **Respect** myself (take care of belongings, sun safety, hygiene, etc.)
Respect members, volunteers, and staff (personal space, belongings, opinions)
Respect the environment (Club buildings, equipment, surrounding space)

- By checking this box, I acknowledge that I have reviewed the 3 R's with my child.

Cancelation/Refund Policy

The Boys and Girls Club requires that full fees be paid at the time of registration. To cancel a registration, for a day camp, a minimum of 10 business days advance notice is required to obtain a refund. There are no refunds for cancellations made less than 10 business days before the start of your registered session.

As many camp sessions will be fully registered with a wait list, please ensure you provide as much notice as possible if you must cancel, as we strive to include as many children in our programs as possible.

- By checking this box, I acknowledge that I have read and understand the cancellation/refund policy listed above.

Privacy Statement

Boys and Girls Clubs of South Coast BC (BGC) respects your privacy. We protect your personal information and adhere to all legislative requirements with respect to protecting your privacy. We do not rent, sell, or trade our mailing lists. We use your personal information to provide services/programs and to keep you informed and up to date on all activities to volunteer or provide support and through periodic communication. If at any time you wish to be removed from any of these types of communication, or receive a full copy of the BGC Privacy Statement, simply notify us by phone 604-879-6554, fax 604-879-6525, or email at info@bgcbc.ca and we will gladly accommodate your request.

- Yes, please sign me up for the BGC updates via email (i.e. newsletter)!



Club Membership Agreement

Acknowledgement of Risks and Consent Form

----- Please read and sign the bottom of this form -----

Description of Activities and Inherent Risks

Boys and Girls Clubs of South Coast BC (“BGC”) operates a variety of programs for participating children and youth (“Club members”) at our Club sites. BGC is committed to operating its programs in as safe a manner as possible. The following is to inform you of the potential risks inherent in Club programs and activities.

BGC provides programming and scheduled activities that are supervised by Club leaders. Most activities take place at the Club, while others are off-site. The level of supervision varies according to the nature of the activity. For example, an organized floor hockey tournament may be subject to more continuous supervision than a pick-up game of floor hockey during gym drop-in hours. BGC is not responsible for Club members before they arrive at the Club or after they leave the Club premises.

Activities at our Clubs include, but are not limited to:

- Indoor sports such as tennis, basketball, floor hockey, soccer, volleyball, badminton, archery, gym games, and martial arts
- Creative activities such as painting, ceramics, paper and yarn crafts, theatre, and dance
- Games room activities such as pool, foosball, ping pong, video games, board games, and puzzles
- Educational activities such as music, computer instruction, woodworking, cooking, and leadership programs

Off-site activities include, but are not limited to:

- Outdoor sports such as soccer, football, road hockey, cycling, baseball, tennis, frisbee, running, swimming, waterslides, skating, hiking, and camping
- Inter-Club or inter-organizational activities such as floor hockey, baseball, and ice hockey
- Outings to sporting events, libraries, museums, and other public events

Each of the Club activities, as well as transportation to and from the activity, carries inherent risks. These risks include, but are not limited to, contact during sports (with another person, equipment, or property), group separation, slips, falls, burns, transportation accidents, and other accidents.

In addition, the risks of the activities may also include, but are not limited to, the following: acts of other participants (including the failure of other Club members to follow instructions), malfunctions in equipment, consumption of food and drink, emergency treatment, or other services provided.

The inherent risks may lead to injury or illness including, but not limited to, minor injuries (scratches, insect bites, cuts/wounds), illnesses (respiratory, stomach), bodily injury (arms, legs, and torso), head or back injury, and accidental death.

In an effort to make activities as safe as possible, it is essential that Club members follow all Club rules, and the instructions and safety precautions for each activity. Additional risks may develop if Club members do not carefully follow rules and instructions.



Consent / Acknowledgement of Risks

I have read the description of programs and inherent risks and give my permission for the Club member named below to participate in Club activities. I accept that there are inherent risks involved in these activities and agree to accept those risks. I have sought explanations from the Club of any risks I do not understand. I have explained the risks to my child and have ensured that they understand them.

Rules

I have explained to my child that there are Club rules that must be followed and that they must use their best efforts to participate and play safely, fairly, responsibly, and with respect for the rights and property of other Club members and the Club Leaders. I have informed my child that a breach of the rules may result in remedial action including limits on their participation in Club activities or being sent home.

I, _____, being the parent/guardian or person having care
Print name of Parent/Guardian

and custody of _____, am aware of the risks associated with the
Print name of Club member

programs and activities offered by BGC as described above and do hereby give consent and agree to the terms above.

Signature of Parent/Guardian

Date

Consent / Publicity

I also hereby give permission for BGC to use a visual reproduction (photograph, film, video, etc.) of the Club member named above for publicity purposes connected with promotion of the work of BGC.

Signature of Parent/Guardian

Date

BGC requires a photograph or digital image of each club member that can be used to readily identify the club member in an emergency. This photograph will only be used in case of emergency, and will not be used for any other purpose.

I, _____, being the parent/guardian or person having care
Print name of Parent/Guardian

and custody of _____, agree that Club staff may take and upload
Print name of Club member

a photo of my child onto our database system for emergency purposes.

Signature of Parent/Guardian

Date

FOR PRE-TEEN MEMBERS ONLY

Consent / Pre-teen Members

In addition to the daily after-school licensed programs, the Club offers Pre-teen/Youth activities that include children 13+ that are unlicensed.

I give permission for my child to also participate in unlicensed pre-teen/youth activities with youth aged 13+.

Signature of Parent/Guardian

Date