

### MEMBERSHIP APPLICATION FORM

#### Club Site: \_\_\_\_

# Welcome to Boys and Girls Clubs Big Brothers Big Sisters,

The Agency provides a variety of program opportunities and supports. In order for your child/youth to participate in any of the programming at Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area (BGCBigs); please complete this membership application form and return it to the club with your child. Once the form is completed and you have signed the form, your child will be able to participate in our programming. Please speak to the Club staff for more information about all age programs. Please note that there is <u>NO MEMBERSHIP FEE\*\*</u>.

#### **PERSONAL INFORMATION:**

Child's Name:							
Age:	<b>Gender</b> : Male / Fe	emale	Gra	de:		Birth date:	
			Sch	ool:		Month / day / year	
Custodial Parent/C	Guardian Name:						
Relationship to Child:			Who does child live with: (single parent mom, grandparents, ect.)				
Home Address:			Parent's Email Address 🖂: Child's Email Address 🖂:			Child's Email Address 🖂 :	
Postal Code:			Home Phone Number: ①				
Cell Phone Number: ①			Work Phone Number: ①				
Is your child able to walk home alone? □ YES □ NO			If NO, please indicate who authorized to pick them up or walk them home?				
In the event of an yourself)	emergency, if we cann	ot reach you,	, whon	n may we c	ontact?	(This must be someone other than	
			ONSHIP TO CHILD:			PHONE NUMBER ①:	
Alberta Health Car	e Number:						
HEALTH CONCERNS: Asthma Allergies(please specify what your child is allergic to			) [	In case of emergency, is your child on any medication or medical alert? YES INO Please specify:			
Other (please s	pecify)		'	icuse spec			
Is your child a vegetarian?			_		Does y	our child eat pork?	
Does your child h	ave any other food cor	ncerns?					

	ow we can best support him/her:		
How did you hear about Boys & Girls Clubs Big Brothers	s Big Sisters?		
Has your child been a member of either Boys & Girls Clu			
If yes, for how many years? which program?	?		
Are you a single parent family? 🛛 YES 🔲 NO			
What other programs or services does your Child and o linked with the family, youth workers, YMCA programs,	r family participate in? (Please include any support workers , aid workers, etc.)		
What would best describe your current source of incom	ne?		
Employed FT  Employed PT  Student  Employed PT	nployment Insurance  Social Assistance		
Disability 🗌 Other 🗌 What:			
If you were to estimate your household's annual incom	e, what range would you select? (Select one below)		
□ Under \$30 000 □ \$30 000 - \$50 000	□ \$50 000 - \$75 000 □ Over \$60 000		
Do you have involvement with Alberta Human Services	, Child and Family Services Authority? Yes $\Box$ No $\Box$		
Type of Involvement: Family Enhancement   Protection	on 🗆		
Worker name Phone			
	*		
What is your family's cultural background?			
Parent Languages Spoken:	Child Languages Spoken:		
Is your child a Canadian Citizen 🛛 YES 🗍 NO	<b>Do you need an interpreter?</b> TYES INO		
Was your child born in Canada 🛛 🗆 YES 🗔 NO 🛛 If N	NO, what country were they born in?		
Newcomer Status?   YES  NO If ye	s, please check one:		
<ul> <li>☐ Permanent Resident under 3 years</li> <li>☐ Permanent R</li> <li>☐ Temporary F</li> </ul>	esident over 3 years		
Immigration Number/Permanent Resident Card #	This information is collected and shared with funding bodies a part of our agreement with provincial and federal funding sources.		
As a result of completing this form we will be able to pro -Academic supports, Physical Activity, Arts and C daily snacks and meals.	 ovide your child with; outure, Life Skills programming, field trip opportunities and		

Please sign the next two pages and return to the club!! There are 3 required spots for signature

#### CONSENT FOR PROVISION OF SERVICE:

As the parent/guardian of \_\_\_\_\_\_\_, I hereby provide my consent for my child to participate in Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area programs, including drop in, registered based programs, and recreational activities, whether these programs occur at a club or an outside program location (i.e. – school gym or field trip). I agree that it is my responsibility to get my child to and from the club/program location.

I am fully aware and agree to the following:

- In the event that programs change, my child becomes ill or a behavioural issue arises with my child, I am able to pick my child up or my child is able to walk home immediately. \_\_\_\_\_ (initial)
- I agree that the program is drop-in and it is my responsibility to clearly communicate with my child and staff my rules for their comings and goings at the program. In collaboration with staff, we will work to ensure the safety of my child during program hours. \_\_\_\_\_ (initial)

I understand that my child may, from time to time, participate in programs away from the club/program location, including field trips, and that my child may be transported by Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area staff or volunteers for the purpose of participating in these programs and/or field trips. A separate consent form will be sent home for these special events.

I agree that Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area will not be responsible for any injuries my child may sustain from/while participating in any Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area programs and/or field trips whatsoever, or while on Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area property.

I authorize the senior staff member present with my child to seek medical attention for my child in the event of an injury or sickness.

I waive my legal right against Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area, employees and/or volunteers of Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area, for any loss, injury or damage suffered during or by reason of medical attention and undertake to be responsible for any hospitalization, medical and ambulance expense.

I agree to work in partnership with the staff and volunteers of Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area to deal with any behavioural issues concerning my child. I understand that all data collected will adhere to Freedom of Information and Protection of Privacy Act and Personal Information Protection Act.

I agree that my child will participate in a Safety Training Program offered by Boys & Girls Clubs Big Brothers Big Sisters. The Safety Training Program is designed to:

- Develop a children's sense of personal space, privacy and comfort.
- Empower a child to act in positive ways to assert their rights.
- Enhance a child's risk assessment, problem solving skills, and personal safety skills.
- Contribute to a child's self-esteem so that they are equipped to protect themselves.
- Provide children with the knowledge and tools for abuse prevention.

Parent / Guardian Signature

Date

# CONSENT FOR AUDIO / VISUAL RECORDING:

From time to time, staff and/or volunteers will take pictures of the children participating in programs, activities, field trips and/or special events, or members of the media may come to the club/program location to do a news story on our programs.

By checking <u>YES</u> you are providing consent that your child can be photographed, videotaped or recorded in conjunction with programs of Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area and further agree that materials produced as a result are the property of Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area.

My checking <u>NO</u>, Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area will not photograph, videotape or record your child in conjunction with programs of Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area.

As the parent/guardian of \_\_\_\_\_,

Please check one of the boxes.

Parent / Guardian Signature

Date

## CONFIDENTIALITY AGREEMENT

The Agency believes in maintaining high standards of ethical conduct in the operation of the agency's programs and the representation of them to the community, including a commitment to privacy and confidentiality within the limitations defined by law. The Agency adheres to all applicable Federal and Provincial Privacy legislation and is committed to protecting the professional and personal privacy and confidentiality of its volunteers, youth and their families.

All individuals in a position of trust within the agency are required to sign a privacy/confidentiality agreement. This includes staff and volunteers. It is important to understand that information will be shared with other staff only as needed for service to your child or family. Care will be taken that information to any involved professional outside of the agency is only released if relevant only to the agent's specific needs and as necessary for the best care of the child or his/her family, and only with the signed consent of the family except in the case of concern of child abuse or neglect, where staff are required by law to inform the proper authorities, which could result in the disclosure of confidential information. If subpoenaed to a trial, hearing or proceeding, Agency staff members are again required by law to disclosure. The names of the children and/or their parents concerned in any judicial proceeding shall not be shared outside the agency.

I have read the Boys & Girls Clubs Big Brothers Big Sisters of Edmonton & Area's statement on confidentiality and do understand and agree.

Parent / Guardian Signature

Date