



**BOYS & GIRLS CLUB OF ERIE, INC.**  
**MEMBERSHIP APPLICATION**  
**2023-2024**  
(Please Print)

BGCE Office Use
_____ Staff Reviewed

**All Information Must Be Completed**

**Membership open to ages 7 - 17**

Member's Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Home Address (Number & Street): \_\_\_\_\_ Zip Code \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

Mother's Name & Contact Information: \_\_\_\_\_

Father's Name & Contact Information: \_\_\_\_\_

Emergency Contact Person & Information: \_\_\_\_\_

**For Grant Use & Meal Eligibility Purposes Only:**

Household Income \_\_\_\_\_ Number residing in Household \_\_\_\_\_

Member's School \_\_\_\_\_ Grade \_\_\_\_\_

Member's Race \_\_\_\_\_ Member's Ethnicity: Hispanic / Non-Hispanic (circle one)

By Initialing here \_\_\_\_\_, I decline to answer the following information:

- Household Income       Household Size       School       Grade       Race       Ethnicity

**MEDICAL INFORMATION:**

Does child have any allergies? \_\_\_ Yes \_\_\_ No If yes, what are they? \_\_\_\_\_

Is child on any medication? \_\_\_ Yes \_\_\_ No If yes, what medication? \_\_\_\_\_

**PLEASE NOTE: CHILDREN WHO REQUIRE MEDICATION MUST HAVE A MEDICATION RECORD ON FILE AT THE BOYS & GIRLS CLUB**

**Membership Cost: FREE**

**Program Schedule is subject to change due to inclement weather and/or staffing availability**  
**For questions and concerns, please contact Joe Grucza, Director of Program Operations via email at [jgruczabgce@gmail.com](mailto:jgruczabgce@gmail.com) or text/call 814-449-2909**

- I have read this completed registration form and understand the rules of the Boys & Girls Club. It is agreed and understood that the Boys & Girls Club of Erie and its employees are not liable or legally responsible for any loss or bodily injury while the child is on Club premises or engaged in any Club activity away from the Club unless such loss or injury results from negligence or a willful act of an employee in the performance of his/her employment.
- I consent that still/film photography and/or electronic media recordings may be made of my child by The Boys & Girls Club of Erie and may be used for any purpose and copies may be distributed in whole or in part, in any form of media, without compensation to me.
- I understand the possession and use of electronic devices on Club property is strongly discouraged. The Boys & Girls Club of Erie assumes no responsibility for the use, damage, or theft of any electronic device.
- I have received a copy of the Boys & Girls Club of Erie's Discipline Policy
- I have received a copy of the Boys & Girls Club of Erie's Confidentiality/Release of Information Policy

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

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

**Statement of Non-Discrimination**

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), disability, age, or reprisal or retaliation for prior civil rights activity conducted of funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form.

To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- 1) Mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 2250-9410;
- 2) Fax: (202) 690-7442; or
- 3) E-mail: [program.intake@usda.gov](mailto:program.intake@usda.gov)

This institution is an equal opportunity provider.

**Anti-Bullying Policy**

**Purpose**

This policy protects the dignity and safety of youth served by the City of Erie. This policy prohibits bullying, harassment, and intimidation in all youth-serving city services, activities, programs, and facilities.

**Definitions**

“Bullying” shall be defined as any severe, pervasive, or persistent act or conduct whether physical, electronic, or verbal that:

- 1. May be based on a youth’s actual or perceived race, color, ethnicity, religion, national origin, sex age, marital status, personal appearance, sexual orientation, gender identity or expression, intellectual ability, familial status, family responsibilities, matriculating, political affiliation, genetic information, disability, source of income, or any other distinguishing characteristic, or on a youth’s association with a person or group with any of the actual or perceived foregoing characteristics; and
- 2. Can reasonably be predicted to:
  - 1. Place the youth in reasonable fear of physical harm to their person or property;
  - 2. Cause a substantial detrimental effect on the youth’s physical or mental health;
  - 3. Substantially interfere with the youth’s academic performance or attendance; or
  - 4. Substantially interfere with the youth’s ability to participate in or benefit from the services, activities, programs, facilities or privileges provided by an agency or contractor or agent thereof.

**Prohibition against Bullying**

- 1. Acts of bullying, including cyberbullying, whether by youth, volunteers, or staff, are prohibited in all youth-serving city services, activities, programs and facilities.
- 2. Retaliation against a youth, volunteer, or staff member who reports bullying, provides information about an act of bullying, or witnesses an act of bullying is also prohibited.
- 3. All agencies and departments that provide services, activities, programs and facilities for youth and third-party organizations that receive city funding for services and programs that included youth shall establish a clear policy for reporting, addressing, and preventing bullying as defined above. This policy shall include a requirement for annual training for all staff on said policy and on best bullying prevention practices.

I have read and understand the City of Erie’s youth programs’ **Anti-Bullying Policy**

\_\_\_\_\_  
Child’s Name – Print

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

**Erie’s Public Schools do not endorse nor sponsor this activity or program.**