BOYS & GIRLS CLUB	MEMBI	RLS CLUB OF ERSHIP APPLI 2023-2024 (Please Print)	ICATION			office Use aff Reviewed
All Information Mus	<u>t Be Completed</u>		Membership	open to age	s 7 - 17	
Member's Last Name:		]	First Name:			
Home Address (Numb	er & Street):	Zip Code				
City:	_ State:	Date of Birth:	Age:	Se	x:	
Mother's Name & Cor	ntact Information	:				
Father's Name & Con	tact Information:					
Emergency Contact Pe	erson & Informat	ion:				
	<u>For G</u>	rant Use & Meal	l Eligibility Purposes	<u>Only</u> :		
Household Income			Number residing in Ho	ousehold		
Member's School			Grade			
Member's Race			Member's Ethnicity: 1	Hispanic / Non	-Hispanic	(circle one)
MEDICAL INFORM	IATION:					
Does child have any a	llergies? Yes	No If yes, v	what are they?			-
Is child on any medica PLEASE NOTE: CH FILE AT THE BOYS	HILDREN WHO	<b>REQUIRE ME</b>	what medication? DICATION MUST H	AVE A MED	ICATION	RECORD ON
		Membe	rship Cost: FREE			
0	and concerns, p	blease contact Jo	ue to inclement wea be Grucza, Director l <u>.com</u> or text/call 81	of Program		•
	ie and its employee	es are not liable or le	nd the rules of the Boys & egally responsible for any inless such loss or injury	loss or bodily i	injury while	the child is on Club

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: <u>http://www.ascr.usda.gov/complaint\_filing\_cust.html</u>, 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

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 sever, 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. Con 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 proved 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	n Signature
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Erie's Public Schools do not endorse nor sponsor this activity or program.

Date