



www.bgcgw.org

2021-2022 SCHOOL YEAR CHECKLIST
DO YOU HAVE THESE ITEMS WITH YOU?

- ☐ Copy of the physical form not more than two years old and immunization records signed by a physician (not just a copy)
- ☐ Birth Certificate (We need to see the original or a certified copy)
- ☐ (2) Emergency phone numbers and addresses besides yourself
- ☐ Doctor's name and phone number (If the child is a military dependent, provide the name of the hospital and phone number)
- ☐ Insurance Information
- ☐ Registration / Membership / Week's Payment
- ☐ All paperwork filled out **completely**

All these items are required by the State Licensing Board and **no one** will be registered without submitting all of the documents above at the time of registration.

Ages 5-17

2021 – 2022

SCHOOL YEAR



GREAT FUTURES START HERE.



<u>Application</u> YOUTH INFORMATION			
First Name	Last Name	MI	DOB
Address	City	Zip	Phone Number
School	Grade	Age	Sex
FAMILY INFORMATION			
Mother Name:		Father Name:	
Address:		Address:	
E-mail		E-mail	
Employer		Employer	
Work Number		Work Number	
Cell Number		Cell Number	
Child live with: (please check one) <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Both <input type="checkbox"/> Other			
HEALTH INFORMATION			
Doctors Name		Phone Number	
Health Problems (if any)		Allergies	
Medications (if any)		<i>**Any Medications to be administered at our facility must be accompanied by a completed Medication Consent Form**</i>	
EMERGENCY CONTACT & PICK UP AUTHORIZATION – Other than Parents			
<i>Persons authorized to pick up child in case of emergency - ALL sections MUST have complete address information</i>			
Name:		Name:	
Address		Address	
Phone Number		Phone Number	
OTHER PERSONS ALLOWED TO PICK UP CHILD			
<i>Any person not listed will NOT be able to pick up children from our facility</i>			
Name:		Name:	
Name:		Name:	
Is there anyone legally NOT allowed to pick up your child? If so, we must have a copy of the legal paperwork on file.			
EMERGENCY MEDICAL CARE AUTHORIZATION			
I, _____ hereby authorize Funland Before & After School program staff and/or other Boys & Girls Club staff to obtain emergency medical care for my child while under their care. I also have received, read, and understand the Fun Land brochure outlining the rules and regulations of the Day Care, which my child and I will abide by.			
_____ Parent Signature		_____ Date	

PARENTAL AGREEMENTS

Please initial on each line for confirmation

- _____ My child has my permission to ride the Boys & Girls Bus and to accompany them on all field trips.
- _____ My child will obey all rules listed in the handbook and membership application while on the bus or at the club.
- _____ The child day care center agrees to notify the parent(s)/guardian(s) whenever the child becomes ill and the parent(s)/guardian(s) will arrange to have the child picked up as soon as possible if so requested by the center.
- _____ The parent(s)/guardian(s) authorize the child day center to obtain immediate medical care if any emergency occurs when the parent(s)/guardian(s) cannot be located.
- _____ The parent(s)/guardian(s) agree to inform the center within 24 hours, or the next business day, after his/her child or any member of the immediate household has developed reportable communicable disease, as defined by the State Board of Health. All life threatening diseases which must be reported immediately.
- _____ **I have received a copy of the handbook and have reviewed the rules and expectations with my child.**

Signature of Parent/Guardian

Date

PICTURE/VIDEO AUTHORIZATION

From time to time pictures are taken of the children attending our activities and on occasion are used in-house for promotional purposes.

I give permission for my child (ren)'s picture to be taken and if selected, to be used by the Prince William Boys & Girls Clubs.

Photo: YES _____ (please initial)
NO _____ (please initial)

Video: YES _____ (please initial)
NO _____ (please initial)

SUNSCREEN/REPELLENT PERMISSION

I give my child _____ permission to have sunscreen and or/bug repellent applied on any given day during our program. I understand that they will be using SPF-15 or higher.

Signature of Parent/Guardian

Date

OFFICE USE ONLY – IDENTITY VERIFICATION

Staff Initials: _____

Place of Birth

Date of Birth

Birth Certificate Number

Date Issued

Other Form of Proof

Proof of the child's identity and age may include a certified copy of the child's birth certificate, birth registration card, notification of birth (hospital, physician or midwife record), passport, copy of the placement agreement or other proof the child's identity from a child placing agency, record from a public school in Virginia, or certification by a principal or his designee of a public school in the U.S. that a certified copy of the child's birth record was previously presented. Viewing the child's proof of identity is not necessary when the child attends a public school in Virginia and the center assumes responsibility for the child directly from the school (i.e. after school program) or the center transfers responsibility of the child directly to the school (i.e. before program). While programs are not required to keep the proof of the child's identity, documentation of viewing this information must be maintained for each child.

GREAT FUTURES START *HERE.*

BOYS & GIRLS CLUB OJP

PARENT/GUARDIAN CONSENT FORM

I, the parent or legal guardian for _____ hereby give my permission for my child to participate in the Mentoring Program at the Boys & Girls Club.

I fully understand that the program involves mentors, who shall be selected from the community and will be screened (including a criminal background check) and trained before beginning in the program. A mentor will be expected to spend a minimum of one hour per week with my child on-site at the Boys & Girls Club. The mentor is not allowed to take or meet my child beyond the Club facility.

I understand that my child will participate in an orientation session at the Club in which the program will be explained. The program is planned to last one year and continuation may then be discussed.

I understand that during the course of the mentoring program there may be special group events (incorporating all mentors and youth) and family events planned. I understand that the staff of the Club will provide ongoing monitoring of the mentoring activities.

I give the Boys & Girls Club Mentoring Program Coordinator permission to obtain my child's academic and attendance records from my child's school.

I permit the Mentoring Program staff and the Boys & Girls Club to utilize photographs of my child taken during his/her involvement in the mentoring program and waive all rights of compensation.

(Signature of Parent/Guardian)

(Printed name of Parent/Guardian)

Date_____

Please sign the permission form and return to the Boys & Girls Club Mentoring Program Coordinator
by_____.
(date)

Thank you!



Prince William County/Manassas Branches



GREAT FUTURES START HERE.

BOYS & GIRLS CLUB OJP

FORMULARIO DE CONSENTIMIENTO DE PADRE/MADRE O ENCARGADO

Yo, padre, madre o tutor legal de _____ autorizo a que mi hijo _____ participe en el programa de mentoría del Boys & Girls Club.

Entiendo totalmente que en el programa participan mentores, quienes serán seleccionados en la comunidad. Y a quienes se les hará una verificación de antecedentes (incluyendo antecedentes penales). Además los mismos serán adiestrados antes de comenzar en el programa. Se espera que el mentor pase al menos una hora por semana con mi hijo/a en el Boys & Girls Club. El mentor no está autorizado a salir ni a compartir con mi hijo/a más allá de las instalaciones del Club

Entiendo que mi hijo/a participará de una sesión de orientación en el Club en la que se le explicará el programa de mentoría. Se espera que el programa tenga una duración de un año.

Entiendo que durante el curso del programa de mentoría pueden haber eventos especiales grupales (reuniendo a todos los mentores y a los participantes), al igual que eventos familiares. Entiendo que el personal del Club estará continuamente monitoreando las actividades del programa de mentoría.

Autorizo al Coordinador del programa de mentoría del Club a obtener el record académico y de asistencia de la escuela de mi hijo/a.

Autorizo al personal del programa de mentoría y al personal del Boys and Girls Club a tomar y a utilizar fotografías de mi hijo/a durante su participación en el programa de mentoría, renunciando así a todos los derechos de compensación.

(Firma del padre/madre o tutor legal)

(Nombre de padre/madre o tutor legal)

Fecha _____

Favor firma la hoja de consentimiento y devolver el documento al personal Coordinador del Programa de Mentoría del Boys & Girls Club.
(fecha)

¡Gracias!



LOS GRANDES FUTUROS COMIENZAN AQUI!
GREAT FUTURES START HERE.

Infection Control Policy

It is inevitable that children will get sick, no matter where they are. As children begin to have contact with the world around them, they come into contact with viruses and bacteria that are foreign to their bodies. This is the way they build up their immunities. We cannot shield a child completely; however we do want to protect a child from an unusually high exposure to germs all at once.

In the Club setting, children are in contact with many other children. It is in this situation that the illness of one child can spread rapidly through the rest of the group and the staff as well if stringent measures to prevent this spread are not taken.

For this reason, the staff at the center will take constant precautions to prevent the spread of disease. Many common childhood diseases are contagious. They are caused by germs which may be spread through coughs, sneezes, and runny noses. Other diseases are spread through direct contact. Careful hand washing by staff and children can eliminate approximately 75% of the risk of spreading these illnesses. Other precautions include separating sick children from those who are well and working to maintain sanitary conditions throughout the center.

You, the parents, can help us in our effort to keep your children healthy. We ask for your cooperation in the following ways:

1. If your child has been exposed to any diseases listed on the accompanying chart, we ask that you notify us of the exposure within the 24 hrs or by the next business day.
2. If your child shows any of the following symptoms you will be called and asked to come immediately. If your child has any of the following symptoms at home, we ask that you keep them out of day care until the symptoms are gone or a physician says it's ok to return.

The symptoms include:

- A fever greater than 100 F
- Severe coughing-child gets red or blue in the face
- High-pitched croupy or whooping sounds after coughing
- Difficult or rapid breathing
- Yellowish skin or eyes
- Pinkeye – tears, redness of eye lining, followed by swelling and discharge
- Unusual spots or rashes
- Sore throat or trouble swallowing
- Infected skin patches
- Crusty, bright yellow, dry, or gummy areas of skin- accompanied by fever
- Unusually dark, tea colored urine-especially with a fever
- Grey or white stool
- Stiff neck
- Vomiting
- Severe itching of body or scalp or scratching of the scalp

It is imperative that we all work together to keep all of the children who attend the center as healthy and happy as possible. We thank you for your cooperation.

Parent Infectious Control Policy Agreement

Child's Name: _____

I have read and understand the infection control policies, and I agree to abide by them for the protection of my child as well as the other children and staff members at the Boys & Girls Club.

Date

Signature of parent or guardian

Staff Initials

ALLOY BOYS & GIRLS CLUB'S CODE OF CONDUCT

- Play fairly and be honest.
- Bring your membership card every day.
- Be respectful of Boys & Girls Club Staff.
- Say only good things about others.
- Resolve disagreements in a positive way.
- Be respectful of other members and their property.
- Take care of your Boys & Girls Club facility and equipment.
- Avoid the use of improper language.
- Remove hats / caps before entering the building.
- Applaud the efforts of others.
- Run outside and in the gym only.
- Stay with your assigned group at all times.
- Listen when staff is talking to you.
- Dress appropriately at all times.
- Smoking, drugs, alcohol and weapons are prohibited.
- Chewing gum is not allowed. Eat and drink in designated areas only.
- While on the B&G Club's bus/van you must be seated and have a seatbelt on at all times.
- No cell phones are not allowed during summer program hours.
- After 3 incidents you are suspended from the summer program (there are offenses that can require immediate suspension – that is the decision of the Camp Director and Branch Director)
- Toys, games, etc. need to stay home. We are not responsible for lost, stolen, or broken items.
- Two week notice is required to remove your child from the summer program.
- **If a child is not picked up by 6 PM, there is a late fee. This late fee must be paid by the next business day. There is no Stay Late Policy for the Program. The child must be signed out.**
- I agree to the following summer program rules. I know that if I don't follow the rules there will be consequences for my actions.

Member's signature

Date

I acknowledge that I have read and gone over the Parent Handbook and I understand what is expected of my child (ren).

Parent's signature

Date

Parent Payment Agreement

Just a Reminder:

Payments are due the Friday before the schedule week of attendance. If the payment is not received by Tuesday @ 6pm, the child will not be scheduled to attend the remainder of the week. **NO EXCEPTIONS.** Management understands the condition of our local economy, we want to help when possible, unfortunately, we are affected by the economy as well.

Thank you in advance for your cooperation.

Ms. Janah
Daycare Director

Ms. Keona
Program Director

I have read and understand the policies concerning payment procedures and agree to abide by all payment policies of the Martin K. Alloy Boys & Girls Club.

Child's Name

Date

Parent/Guardian Name

Parent/Guardian Signature



**BOYS & GIRLS CLUBS
OF GREATER WASHINGTON**

Closed for Federal Holiday's 2021 Schedule

<i>Friday, January 1st</i>	<i>New Year's Day</i>
<i>Monday, January 18th</i>	<i>Dr. Martin Luther King, Jr. Day</i>
<i>Wednesday, January 20th</i>	<i>Inauguration Day</i>
<i>Monday, February 15th</i>	<i>President's Day</i>
<i>Monday, May 31st</i>	<i>Memorial Day</i>
<i>Monday, July 5th</i>	<i>In reference of Independence Day</i>
<i>Monday, October 11th</i>	<i>Indigenous Peoples' Day</i>
<i>Thursday, November 11th</i>	<i>Veterans' Day</i>
<i>Thursday, November 25th</i>	<i>Thanksgiving Day</i>
<i>Friday, November 26th</i>	<i>Day after Thanksgiving Day</i>
<i>Friday, December 24th</i>	<i>Christmas Eve (in reference to Christmas Day)</i>

Closed for BGC Training 2021 Schedule

<i>Monday, February 22nd</i>	<i>BGC Training Day</i>
<i>Friday, May 21st</i>	<i>BGC Training Day</i>
<i>Friday, August 27th</i>	<i>BGC Training Day</i>
<i>Friday, December 3rd</i>	<i>BGC Training Day</i>



REQUIRED FOR OUR PARENTS

Sign up for important updates from Janah, Debbie Colston, and K. Staton.

Get information for **Martin K Alloy Boys & Girls Club** right on your phone—not on handouts.

Pick a way to receive messages for **BGC Manassas**:

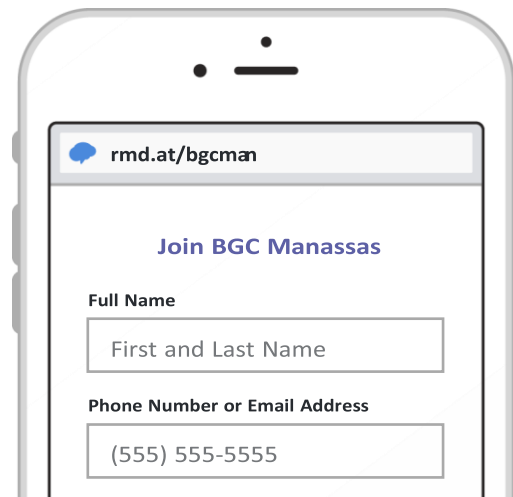
A

If you have a smartphone, get push notifications.

On your iPhone or Android phone, open your web browser and go to the following link:

rmd.at/bgcman

Follow the instructions to sign up for Remind. You'll be prompted to download the mobile app.



B

If you don't have a smartphone, get text notifications.

Text the message [@bgcman](#) to the number **81010**.

If you're having trouble with **81010**, try texting [@bgcman](#) to **(650) 250-0257**.

** Standard text message rates apply.*



Don't have a mobile phone? Go to rmd.at/bgcman on a desktop



Dear Parents/Guardians,

Due to the recent spike of Covid-19 cases The Boys & Girls Clubs of Greater Washington would like to reiterate that all Club Members are required to wear their masks appropriately, covering both their mouth and nose, at all times, in all rooms, including the gym, unless they are eating/drinking while socially distancing themselves from one another. We know that wearing a mask all day may be uncomfortable however, these regulations are put in place to ensure the safety of your Club Member.

Therefore, if a Member struggles with keeping their mask on, covering both their mouth and nose, or refuses to keep their mask on and Club Staff have to consistently remind the Member to keep their mask on both their mouth and nose that Member may receive a disciplinary write up. If the Member receives two or more consecutive disciplinary write ups regarding their difficulties wearing a mask appropriately, then that Member may be suspended or even expelled from our program.

The health and safety of your Member is our number one priority, and we are committed to protecting them by continuing to take the everyday preventative measures; taking Member's temperatures upon entering the building and again in the afternoon, asking guests/parents/guardians to wait in the lobby instead of coming inside, implementing socially distanced group games and activities, requiring Members to thoroughly wash their hands numerous times a day, and disinfecting Club equipment.

It is also imperative that you, the Parents/Guardians, also stress upon your Club Member the importance of washing their hands numerous times a day, socially distancing themselves from other Club Members especially when they are eating, and wearing a mask appropriately, covering both their mouth and nose all day, in every room, including the gym.

You can also use mnemonic devices to help your Club Member remember to wear their mask properly, wash their hands consistently, and socially distance themselves from one another. Here are a few examples:

- I.C.S - I will wash my hands often
Cover my mouth and nose with a mask and
Socially distance myself from others
- "Beep Beep 6 Feet!" - A catchy phrase to remind members to socially distance themselves from one another
- Singing the Alphabet or Happy Birthday - Singing the Alphabet song or the Happy Birthday song is a mnemonic device that will give your Club member something fun and silly to do while they are washing their hands but it is also a way to make sure your Club member washes their hands for at least 30 seconds or more

We will follow these guidelines diligently to stop the spread of Covid-19. We thank you in advance for your cooperation.

Parent signature _____

Date _____

Club Member Signature _____

Date _____

Director Signature _____

Date _____



ALLOY DISCIPLINE POLICY



The Martin K. Alloy Boys & Girls Club holds the right to suspend/expel your child(ren) after 3 written incident reports.

*****PLEASE NOTE: SUSPENSIONS/EXPULSIONS CAN BE GIVEN WITHOUT MULTIPLE WRITTEN INCIDENT REPORTS DUE TO THE SEVERITY OF THE INCIDENT(S).***

DISCIPLINARY
PROCEDURES

Discipline Policy

The policy states that if a child receives three (3) incident reports for hitting, fighting, bullying, as well as any use of inappropriate language, being disrespectful and any appropriate touching of a Staff or Club member(s), then he/she will be suspended from the Club. Suspensions could range from 1-3 days or being expelled from the Club, as well as other Clubs within BGCGW.

Parents, please speak with your child(ren) about his/her behavior while attending the Boys & Girls Club. Thank you!!

Child(ren) Names

Parent/Guardian Signature

Parent/Guardian Printed Name

Date



TRANSPORTATION AUTHORIZATION

I _____, give the Boys & Girls Club (Funland Before &
Parent's name

After School Program authorization to transport my child/children,

Child/Children's name

to and from _____.
Child's School name

Parent Signature

Date

Director Signature

Date