



MEMBERSHIP APPLICATION

Serving the Brigham City, Tremonton & Logan Areas
Main office, 650 E 700 S Brigham City, Utah 84302
435-723-6224; www.bcbrcub.org
Original must be turned in at a club site

Date of Application: _____ New Member ☐ Renewal ☐ TANF Form Completed ☐ Birth Certificate ☐
Base Club Site: Brigham City Area ☐ Logan Area ☐ Tremonton Area ☐ or School Base Site _____

1. Member Name: _____

Birth Date: _____ Gender: _____

Home Address : _____

School Attending: _____ Grade: _____ School Student ID Number: _____

2. Member Name: _____ Birth Date: _____ Gender: _____

Home Address: _____ School Attending: _____ Grade: _____

School Student ID Number: : _____

Parent/Guardian: _____ Phone: _____ Relationship to Child: _____

Address: _____ E-mail: _____ Other Phone: _____

Parent/Guardian: _____ Phone: _____ Relationship to Child: _____

Address: _____ E-mail: _____ Other Phone: _____

Additional Emergency Contacts:

Name	Relation to Member	Contact Number(s)

Member Name: _____ Ethnic Origin: _____

Medical conditions, disabilities or illness that would require special consideration:

Member Name: _____ Ethnic Origin: _____

Medical conditions, disabilities or illness that would require special consideration:

Waiver of Liability

By signing this form I am acknowledging that I have the legal right to act as the guardian of the children/members listed on this document.

I understand that the Boys & Girls Club is a drop in program and that each of my children are responsible for his/her attendance and actions while attending the program. I will not hold the Club, Club Partners of Administration liable for any accident or injury while any of my children attends the program of any activities associated with the program.

The Boys & Girls Club is an open door after school program and school break program. Youth are able to sign themselves out of the Club at any time. Please educate your youth as to their responsibilities and your expectations regarding club attendance.

Signature of responsible parent/guardian: _____ Date: _____

Participation Information & Permission

Information & Permission for participation is a requirement for many of the programs and activities the Club offers. Much of the funding the Club receives is dependent on your cooperation.

INCOME SURVEY:

Information on income will remain strictly confidential but provides the Club access to funding to continue to provide care for your youth and your family. Please respond correctly:

Number of persons in your family: _____ School Lunch: ☐ Free ☐ Reduced ☐ Paid

Permission, please check all that you agree to:

☐ TRANSPORTATION POLICY

I give permission for my child(ren) to be transported by the Boys & Girls Clubs of Northern Utah to specified programs, field trips and other club activities. I understand that my child must follow the rules when riding the club cans including always wearing seatbelts, staying seated and other safety rules. Failure to comply with can rules will result in a loss of can transportation privileges. I understand that the can driver's will do all they can to assure the safety of my child(ren) while riding the Boys & Girls Club can. Realize that there is inherent risk any time a person rides in a motor vehicle.

☐ FIELD TRIP & EMERGENCY CARE PERMISSION

I give the Boys & Girls Clubs of Northern Utah permission to take my child(ren) off the grounds for field trips. In the unforeseen event that my child becomes in need of medical care during any club event, I give permission to administer medical care and, if deemed necessary, to transport my child to a hospital.

☐ PERMISSION TO EVALUATE

Various organizations provide money for all or part of our program and may require that the Club evaluate the impact of programs offered at the Club. Therefore, we are asking permission to have your youth participate in surveys concerning programs they may attend. The questions on the surveys may be about your youth's school experiences, drug and alcohol use, trouble with the law, mental health and friends and family. The answers youth give to the survey questions will be held in strictest confidence. Youth are free to skip a question or stop completing the surveys at any time. No information that is given on the survey will affect the youth's current, or any future, program services received. Information from the survey will remain strictly confidential and the identity of your members will never be shared.

☐ PERMISSION TO PARTICIPATE IN MEDIA

I give permission for my child(ren) to participate in community events that may be filmed or recorded in any way. I give permission for my child's picture to be taken and used in publications sanctioned for the professional use of the Boys & Girls Club. I give permission for my child's artwork, or performances to be displayed for the club use.

☐ PROGRAM FEES & PAYMENTS

The Boys & Girls Club of Northern Utah is a non-profit youth organization that charges limited fees for day programs and activities. The Club requires payment for program fees for weekly attendance. Late fees may be assessed for nonpayment. Payment arrangements or help with payments can be made through talking with your site director or by contacting the main clubhouse at 435-723-6224.

☐ PERMISSION TO USE TECHNOLOGY

I give permission for my child(ren) to use technology provided by the Boys and Girls Club of Northern Utah, including computers, Chromebooks, tablets, and internet access, for educational and recreational purposes. I understand my child must use technology safely, responsibly, and respectfully; access appropriate content only; be mindful of what they search and view; play approved games; protect personal information; and follow all staff directions.

Parent/Guardian Signature: _____ Date: _____

For Office Use Only:		Site Attending:	
Membership 1# _____		Membership 2# _____	
Expiration Date: _____	Processed by: _____		
Guardian Signed Policy Page	yes	no	Paid: Cash/Check/CC \$ _____ ck# _____ Staff _____



Boys & Girls Club of Northern Utah Guardian & Member Code of Conduct

Boys & Girls Club of Northern Utah is a youth facility which emphasizes individual growth for children by promoting a safe, healthy, and caring learning environment. We strive to provide a safe, caring and learning environment for all children, families and staff. We believe in equality and respect diversity of all people.

In order to achieve the above, it is imperative that **each** and **every individual** who is associated with our Club abides by this Code of Conduct and conducts him/herself in a respectful manner. Boys & Girls Club of Northern Utah expects that all adults and children within our Clubs be treated with dignity and respect.

Regardless of the capabilities of children, the safety and welfare of everyone in the program must be maintained. We don't have appropriate training for severe disabilities and we are not a behavior facility. **Capacity to self-regulate emotionally & physically is required of youth to attend the Club.** The safety and security of all youth and staff is the number one priority of the Club and can only be achieved when everyone is committed to following Club rules & principles.

Members MUST follow these Club Rules & Principles:

1. **BE RESPECTFUL:** Youth are respectful of themselves, others, property, equipment and space. Youth and families will be respectful of others' ideas. Youth and families will solve problems by talking and listening to each other respectfully to find a solution. They are respectful of the environment, equipment, and materials while attending Club programs. Racial slurs, derogatory name calling, hateful speech while at the Boys & Girls Club WILL NOT be tolerated.
2. **BE RESPONSIBLE:** Keep hands, feet, & objects to yourself. Youth are responsible for their own actions and words. When problems arise, problem solving techniques are used to try to resolve the issue in a positive way. Violence, aggressive behavior, destruction of property, running away, hiding, and the purposeful hurting of others will not be tolerated. Youth are responsible for their actions in all situations. Recognize that staff is responsible for the safety of everyone and cannot allow for youth, regardless of ability, to diminish the safety and security of others.
3. **BE SAFE:** Members need to be with staff in the scheduled areas. Youth need to stay in designated areas and in the supervision of staff. Staff are not allowed to be alone with youth and cannot leave their group to chase or find a member. Members must be able to stay with their group, obey group expectations, maintain appropriate space and participate in programs to attend the Club.
4. **BE SUPPORTIVE OF LEARNING:** Use appropriate voice and language. Youth will learn to the best of their abilities and support the learning of others.
5. **BE RESPECTFUL OF ALL CLUB AND PUBLIC SPACES:** Youth will use equipment properly, youth will follow the rules of the public spaces visited, youth will be respectful of others at the club or in public spaces. Youth will pick up after themselves and assist in cleaning up and putting away equipment and supplies after activities.

A positive environment for children, parents, staff and others involved in our Club is required. If there are problems or questions that need to be addressed, please set a time to meet with the site director or administration and do not take away from the program or address your issues in front of other youth or staff or while programs are going on. Emails and phone calls are always acceptable.

The following, while not limiting, are examples of unacceptable behavior:

1. **All forms of bullying:** i.e. physical, verbal, emotional, social or cyber-bullying including comments, actions or visual displays that are intentional, hurtful and repetitive (i.e. hitting, pushing, name-calling, mocking, excluding someone, spreading rumors or gossip either in person or by using social networking internet sites);
2. **Harassment:** behavior that degrades, demeans, humiliates or embarrasses someone (i.e. touching, name-calling, offensive jokes, yelling, racial slurs, etc.);
3. **All forms of abuse:** sexual, physical, or psychological (including verbally, in writing or otherwise);
4. **Discrimination:** against any person or group because of their race, color, ancestry, nationality, place of origin, ethnic background, religion, age, sex, gender-determined characteristics, sexual orientation, marital or family status, source of income, political belief, and physical and mental disabilities;
5. **Actions that put another person at risk of harm** including violent or attempted violent physical acts (with or without a weapon) and threatening someone; and
6. **The inappropriate use of technology**, including e-mail, the internet and other technology, in keeping with the Club's policy on the use of technology
7. **Unacceptable Items:** Cigarette lighters, drug paraphernalia, weapons of any kind, chains, lasers are not allowed. No gang attire or clothing with offensive language, or that markets any drug will be allowed. Clothing must cover youth. Shirts and shoes are required to attend the Club.

Late Policy: The Boys & Girls Club closes at 6:30 P.M.. Starting at 6:40 P.M. parents will be charged a late fee of \$10.00 every 10 minutes. Any late fees accrued will be due upon pick up. *Budget constraints do not allow us to pay our staff to stay late. Staff is under obligation to call Child Protective Services if your child is not picked up within 45 minutes of the Club's closing. We DO NOT want to take this step, so please be considerate of staff time and make arrangements for your child/children to be picked up on time. ****If you experience an emergency situation, please contact our staff immediately to make arrangements.***

Transportation Rules: Youth will be transported for various reasons during Club programming. All youth must adhere to club transportation rules to maintain transportation privileges. Transportation is only for youth attending the Club programs.

- Your child must obey all Club rules while riding the van.
- Your child must wear a seatbelt at all times in the van.
- Your child is not permitted to open or close the van door(s) at any time. Staff is required to open all doors for Members during transportation.
- Your child may not behave in any way to distract any driver in the van or on the roadway.
- No food or drink is allowed in the van.
- If your child loses his/her transportation privileges, refunds will not be given.
- **Attendance notifications are required for transportation. Failure to inform the Club of your members absence for 3 consecutive instances will result in removal from the pick-up list and they will no longer be transported.**

I, _____, and
(Club Member Signature & Name)

_____ on _____ agree to
(Guardian Signature & Name) (date)

follow the contents of this code of conduct. I understand if I do not follow this code of conduct the Boys & Girls Club can refuse to serve any person or family. A Code of Conduct must be signed individually by each Club Member and Guardian.



Department of Workforce Services

TANF NEEDY FAMILY ELIGIBILITY FORM

Case/PID # if applicable) _____

Section 1: Household information. There must be a dependent child under age 18 living in the home. A Social Security number is a condition of eligibility for assistance required by section 1137 of the Social Security Act. Services will not be delayed or discontinued pending the issuance or verification of a Social Security number, if the applicant has documented application for one. Social Security numbers must be provided for all individuals included in the TANF Needy Family household size. For more information please access the TANF contractor website at <http://jobs.utah.gov/services/tevs/tanfcontract.html>

PLEASE USE A BLACK BALL POINT PEN TO COMPLETE FORM

*Parent or relative caretaker name (first, middle initial, last)	* Social Security number
*Address	* Utah resident? ☐ Yes ☐ No
	* Gender: ☐ Female ☐ Male
*Date of birth (MM/DD/YYYY)	Alien registration number: _____
	Date of Entry: _____
Spouse or relative caretaker name (first, middle initial, last)	Social Security number
Date of Birth (MM/DD/YYYY)	Utah resident? ☐ Yes ☐ No
Date of Entry	Gender: ☐ Female ☐ Male
	Alien registration number: _____
*Dependent Child Name (First, M.I., Last)	* Social Security #
*Date of birth (MM/DD/YYYY)	Alien Registration number: _____
	* Gender: ☐ Female ☐ Male
Dependent Child Name (First, M.I., Last)	Social Security #
Date of birth (MM/DD/YYYY)	Alien Registration number: _____
	Gender: ☐ Female ☐ Male
Dependent Child Name (First, M.I., Last)	Social Security #
Date of birth (MM/DD/YYYY)	Alien Registration number: _____
	Gender: ☐ Female ☐ Male
Dependent Child Name (First, M.I., Last)	Social Security #
Date of birth (MM/DD/YYYY)	Alien Registration number: _____
	Gender: ☐ Female ☐ Male

Section 2: Mark all services the customer is receiving. If any of these services are marked, the family may meet the income eligibility requirement. Documentation must be provided for all services marked. If no services are marked move to Section 3.

☐ CHIP (Children's Health Insurance Program) Plan A, B, or C ☐ Any of the following Family Medicaid Programs: Child Medicaid, 12 Month Transitional Medicaid, Medically Needy Family, Medically Needy Child, Pregnant Woman or Medically Needy Pregnant Women ☐ Food Stamps	☐ Refugee Cash Assistance ☐ Family Employment Program (FEP) ☐ Family Employment Program (FEP) Diversion ☐ TANF (Temporary Assistance for Needy Families) Non-FEP Training ☐ Women, Infant & Children (WIC) Food & Nutrition Service
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Section 3: Income Guidelines. All parent or relative caretaker income is counted even if the parent or relative caretaker is not eligible to be included in the household size.

*Does the family meet the income requirement of the contract or service being provided? ☐ Yes ☐ No
 Refer to Policy, Charts and Tables, Table 13 – Income Guidelines:
[https://jobs.utah.gov/infosource/EmploymentBusinessManual/700 Eligibility/726 Income Guidelines TANF Needy Family - Contracted Services.htm](https://jobs.utah.gov/infosource/EmploymentBusinessManual/700%20Eligibility/726%20Income%20Guidelines%20TANF%20Needy%20Family%20Contracted%20Services.htm)
 Monthly Gross Income of Parent(s) or Relative Caretaker(s) \$ _____
 (Refer to Policy at above web address, Section 720-5, Sources of Includable and Excludable Income)
 *Note: Use prior one full month of gross income and provide documentation of that income in case file.

I attest the information I have provided above is accurate.

 *Applicant Signature

 *Date

I attest the information provided by the customer is accurate to the best of my knowledge.

 *Contractor Signature

 *Date

Note: If any required information is incomplete or incorrect, the customer is not eligible for TANF Needy Family funding.

If you do not agree with the decisions made regarding your case, you may request a Fair Hearing with an impartial Hearing Officer verbally or in writing, by contacting either your contract service provider, or contacting the Department of Workforce Services at 1-877-837-3247 or
<https://jobs.utah.gov/appeals/pa/filingpublic.html>

Contractor will enter required customer information into the TANF Eligibility Verification System (TEVS) at least weekly, using the Form 300. Access the TEVS website at: <http://jobs.utah.gov/jsp/tevs/>

☐ **Form 300 information has been entered into TEVS for all customers with Social Security numbers.**

Equal Opportunity Employer Program

Auxiliary aids and services are available upon request to individuals with disabilities by calling (801) 526-9240. Individuals with speech and/or hearing impairments may call Relay Utah by dialing 711. Spanish Relay Utah: 1-888-346-3162.

INSTRUCTIONS FOR FORM 300 TANF Needy Family Eligibility Form

Purpose: Form 300 is to be completed by all contractors who determine eligibility for services they provide to TANF Needy Families. Documentation substantiating eligibility must be present in the file for each family member included in the TANF Needy Family household. Attach an additional Form 300 if needed for more than four dependent children.

Preparation: Contracts must clearly state any other eligibility factors and documentation required in order for the family to receive the service.

Case/PID may not apply for families not receiving DWS services.

Section 1: Families must have at least one US citizen or eligible alien in the TANF Needy Family household to be eligible for TANF funded services. A household unit includes eligible parents or relative caretaker(s) and their eligible dependent children under the age of 18 living in the home. Documentation of citizenship or immigration status and relationship for all parents or relative caretakers and their dependent children included in the TANF Needy Family household on Form 300 must be present in the case file. Refer to Table 9 for acceptable documentation.

Only enter eligible family members' information on Form 300.

The family must declare they are or intend to be a resident of Utah.

Skip to Section 3 if customer does not currently receive any of the services listed in Section 2

Section 2: Mark services the customer is receiving. Acceptable verification includes current letters or notices showing current eligibility status. All services marked must have documentation of receiving those services included in the case file.

Section 3: Complete Section 3 if customer is not receiving any services listed in Section 2, showing the Gross Monthly Income from the previous one full month. All income is counted. Acceptable verification includes a statement from the employer, copies of check stubs, or other documentation of previous one full month's income. Refer to Table 13 for income guidelines.

The contractor will enter required TANF Needy Family information into TEVS. A DWS employee will retrieve the information from TEVS and complete the required eShare query for the household. The contractor will be notified if additional information from the customer is required or if a family member is no longer eligible for the TANF Needy Family service. Refer to procedure, TANF Needy Family - Using the TANF Eligibility Verification System (TEVS) for Contracted Service.

The contractor will mark the check box at the bottom of Form 300 when required TANF Needy Family information has been entered into TEVS.

Applicant's Signature: The customer must sign indicating the information given is correct.

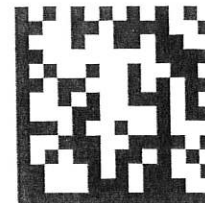
Signatures: The contractor who is determining eligibility must sign and date the form.

Distribution: Original filed in the case record

Retention: Three (3) years



State of Utah
Department of Workforce Services
**RELEASE/DISCLOSURE OF INFORMATION &
CONSENT FOR COORDINATED SERVICES**
ONLY for use by Contracts and Refugee Home Visits
Where UWORKS is Unavailable



D02418900240101

* Name (Print)

PID

Case #

I understand that my records are protected under the State and Federal regulations as well as professional codes of ethics governing confidentiality and cannot be released or disclosed without my written consent, unless otherwise provided for in the State and Federal regulations.

*I authorize the release and/or disclosure of information only to the agencies listed below with the restriction that the information cannot be passed on to any other person or entity/agency ☐ Yes ☐ No

- | | | |
|--|--|--|
| ☐ Div. of Child & Family Services | ☐ Div. of Services for People with Disabilities | ☐ Div. of Juvenile Justice Services |
| ☐ Job Corps | ☐ Juvenile Court | ☐ Local Mental Health Providers |
| ☐ School Districts | ☐ State/Local Health Department | ☐ Substance Abuse Treatment Providers |
| ☐ Vocational Rehabilitation | ☐ Social Security Administration | ☐ Any & All Employer/Worksite |
| | ☐ Other _____ | ☐ Other _____ |

The information selected below is to be released and/or disclosed to coordinate a variety of services on my behalf. In order to provide these services, representatives of public and private agencies may be working together and may need to share information about me with one another.

I authorize the information below to be released from and/or disclosed to the agencies selected above to assist the Department of Workforce Services (DWS) in coordinating services for me. I only authorize the release and/or disclosure of the specific items checked below. I understand that this consent is effective from the date below until the final day of the month following the termination of my currently open program(s) with DWS. I understand I may revoke this consent at any time by sending written notification to my Employment Counselor.

Note: DWS does not disclose controlled documents without consent of the DWS Legal Department.

R=Release my information from a third party to DWS D=Disclose my information from DWS to a third party

R	D	R	D	R	D
☐	☐	☐	☐	☐	☐
Employment Information (wages, hours worked, schedule, etc.)		Employment Plan Development/Renegotiation		Legal Information (court documents/orders, etc.)	
☐	☐	☐	☐	☐	☐
Addtl. Monitoring Information (WSL, CTW, job leads/contacts, etc.)		School Information (progress, attendance, schedule, etc.)		Treatment Information (plan, schedule, attendance, etc.)	
☐	☐	☐	☐	☐	☐
Other _____		Other _____		Other _____	
☐	☒	☐	☐	☐	☐
Other _____		Other _____		Other _____	

* Signature of Customer

*Date

Signature of Parent or Guardian, if under age 18

Date

Equal Opportunity Employer Program

Auxiliary aids and services are available upon request to individuals with disabilities by calling (801) 526-9240. Individuals with speech and/or hearing impairments may call Relay Utah by dialing 711. Spanish Relay Utah: 1-888-346-3162



State of Utah
Department of Workforce Services
TANF CONTRACTED SERVICES
FAMILY COMPOSITION

Organization: _____

TANF service(s) being provided: _____

Name of client receiving service(s): _____

DWS case number (if applicable): _____

Instructions: There must be a dependent child under age 18 living in the home where the client has a plan to reunite or re-engage with. List the names of the dependents and their adult caretakers below:

Name of parent or relative caretaker

DWS case number (if applicable)

Address of parent or relative caretaker

City, State, Zip Code

List dependent children's names:

Dates of birth (MM/DD/YYYY):

Describe re-unification or re-engagement plan. Provide details and anticipated completion date.
Supporting documentation must be present in client's case file.

I attest the information I have provided above is accurate.

Client signature

Date

I give consent for the client to re-unite and/or re-engage with the child(ren) listed above, upon completion of the client's proposed plan.

Parent or relative caretaker signature

Date

Equal Opportunity Employer Program

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BOYS & GIRLS CLUB
OF NORTHERN UTAH

K-12th grade Tuition Agreement Contract

This Tuition Agreement ("Agreement") is entered into between the Boys & Girls Club of Northern Utah and the parent(s)/guardian(s) listed below for the enrollment of their youth in Club programming.

Participant Information

Youth Name: _____

Parent/Guardian Name: _____

Site Attending: _____

Start Date: _____

Tuition & Payment Agreement

I understand and agree that participation in the Boys & Girls Club of Northern Utah program requires payment of tuition fees.

The agreed tuition amount for my child to attend is:

\$_____ **per** _____

(Payment frequency: weekly / monthly / other)

Payments are due on or before the agreed due date. I understand that failure to make payments may result in suspension or removal from the program until the account is brought current.

I also understand and agree to the following:

- Tuition is due regardless of attendance unless otherwise approved by administration.
- Late payments may be subject to additional fees.

- Returned or declined payments may result in additional charges.
- The Boys & Girls Club of Northern Utah reserves the right to change tuition rates with advance notice.
- Any schedule changes or withdrawal requests must be submitted in writing.

Parent/Guardian Agreement

By signing below, I acknowledge that:

- I have read and understand this Tuition Agreement.
- I agree to pay all required fees associated with my child's participation.
- I understand that unpaid balances may affect my child's ability to attend programming.

Signatures

Parent/Guardian Signature: _____

Printed Name: _____

Date: _____