



St. Joseph Academy

ST. JOSEPH ACADEMY COMMUNITY LEARNING CENTER

1600 W. Oklahoma Avenue, Milwaukee, WI 53215
414-646-5337

Area Director: Lisa Manvilla

Dear Parent/Guardian:

Welcome to the 2017-2018 Boys & Girls Clubs of Greater Milwaukee school year experience at St. Joseph Academy Community Learning Center! Our dedicated staff looks forward to a fun and exciting year together. Through a variety of fun and structured activities, we will encourage your child to excel in academics, make positive life choices, develop healthy methods of self-expression and embrace new experiences for a broader world view.

Program Start Date: September 5, 2017

Grades: K4 - 7th

Hours of Operation: 3:30 - 6:00 p.m.

One-Time Membership Registration Fee: \$5 per child

Weekly Fee: \$70 per child (sliding fee scale/scholarships available) see Club Manager

St. Joseph Academy Boys & Girls Club is a state licensed child care provider. If you are eligible for W2/childcare and choose us as your provider, **ALL** your fees will be waived. For current W2/childcare recipients, please see Area Director for details.

Scholarships Available: The inability to pay is not a barrier to participation in the program. Please see Area Director for details.

TO REGISTER:

1. Complete registration packet in full for each youth wishing to attend.
2. Return registration packet to Area Director or office.
3. Please allow up to 48 hours to process registration paperwork.

Please remember your child must be picked up promptly by 6:00 p.m. There is a \$1 per minute per child charge for all members who remain after 6:00 p.m. If you have any questions or concerns, please do not hesitate to contact the Area Director by email at lisam@boysgirlsclubs.org or any staff member at 414-646-5337.

EFFAS
RESPECT
NATION
ACHIEVE
INSPIRE
FUN

PROGRAM CORE AREAS

While at the Clubs, members have access to programs in six core areas that help them become well-rounded individuals with opportunities to explore new areas of interest.

- Character & Leadership
- Education & Career
- The Arts
- Health & Life Skills
- Sports & Fitness
- Outdoor & Environment

THE CLUB ENVIRONMENT

- Safety is our number one goal. Each Club location is a secure facility with trained staff who monitor members' activities at all times.
- Club staff are specially trained to work with young people and support them in all aspects of their lives.
- The Club recognizes the importance of kids having social and emotional learning opportunities in addition to academic support, and all activities are steeped in fun!

MEMBER BENEFITS

- Free, nutritious meals are provided every afternoon to Club members.
- Members are provided with homework help and have access to thousands of dollars in college scholarships.
- There are countless ways for members to get involved in organized sports including basketball, football, baseball, softball, volleyball, and soccer.
- Members have opportunities to attend field trips, and periodically sports tickets are given away to Club families.

WEATHER

As a general guideline, when Milwaukee Public Schools close due to severe weather, Club locations will close as well. Club closings will be announced on local TV stations, including WTMJ-TV 4, WITI-TV 6 and WISN-TV 12.

PICK-UP POLICY

- Members under 13 years of age are to be released only to persons designated on their membership application. Members must be signed out by guardians listed on the sign in/sign out roster. The sign in/sign out roster must contain the member's name, the signature of a guardian and time of departure.
- A guardian may authorize a member to walk home by completing the transportation section of the registration form. The form is maintained in the member's file and the member remains on the walker list until the Club is informed by the guardian that the member is no longer eligible to walk. The sign in/sign out roster must contain the member's name, the signature of the member and time of departure.
- Members are required to sign out of the site using the sign in/sign out roster. Re-entry is not allowed.

FOLLOW US ON SOCIAL MEDIA

We are always posting about the happenings in the Clubs. Follow us on social media to see what's going on!



Facebook.com/BGCMilwaukee



Twitter.com/BGCMilwaukee

** Information will vary depending on each Club location**

We are a state licensed child care provider for ages 4 to 12 under the Wisconsin Works (W-2) program.





ANNUAL YOUTH MEMBERSHIP APPLICATION

Membership Renewal

Member's Information

First Name	Middle Name	Last Name
Address & Apt #	City	Zip
Social Security #	Birthdate	MPS ID# (if applicable)
School Attending	School District	Current Grade
GENDER (check one) <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Transgender		LANGUAGE (check one) <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Hmong <input type="checkbox"/> Other
ETHNICITY (check one) <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black/African American <input type="checkbox"/> Hispanic/Latino		
<input type="checkbox"/> Multi-Racial <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> White/Caucasian <input type="checkbox"/> Other _____		
MEMBER LIVES WITH (check one) <input type="checkbox"/> Both Parents <input type="checkbox"/> Mother Only <input type="checkbox"/> Father Only <input type="checkbox"/> Guardian		
<input type="checkbox"/> Foster Care <input type="checkbox"/> Group Home <input type="checkbox"/> Other _____		
SCHOOL LUNCH PROGRAM ELIGIBILITY (check one) <input type="checkbox"/> Free <input type="checkbox"/> Reduced <input type="checkbox"/> Not Eligible <input type="checkbox"/> Unknown		
Has this member ever attended a Boys & Girls Club or program before? (check one) <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Club Location _____		

PARENT/GUARDIAN PLEASE COMPLETE, READ & SIGN

Are you or any member of your household on active military duty? (check one) <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you or any member of your household a Club alumni? (check one) <input type="checkbox"/> Yes <input type="checkbox"/> No
How many members are in your household, including yourself? _____
ANNUAL HOUSEHOLD INCOME (check one) <input type="checkbox"/> Less than \$9,999 <input type="checkbox"/> \$10,000-14,999 <input type="checkbox"/> \$15,000-22,999
<input type="checkbox"/> \$23,000-33,999 <input type="checkbox"/> \$34,000-49,999 <input type="checkbox"/> \$50,000-74,999 <input type="checkbox"/> \$75,000 or more
You can contact me through the following methods(check all that apply) <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Text <input type="checkbox"/> Mail

First Name	Last Name	Home Phone	Cell Phone	Work Phone	Email

If for some reason we are unable to reach the parents/guardians listed above, who else should be contacted in case of emergency?

Relation to Member	First Name	Last Name	Home Phone	Cell Phone	Work Phone

Name of Doctor/Medical Facility _____
 Address _____ Phone _____
 Insurance Policy Holder Name _____

Prescription or over the counter medications (check one) No Yes If yes, please list all _____

Special Medical Conditions (check one) No Yes If Yes, please check all applicable

ADD/ADHD Asthma Diabetes Cerebral palsy/motor condition

Emotional/behavior disorder Epilepsy/Seizure disorder Gastrointestinal or feeding concerns

Other medical conditions/reasons that would inhibit the member from taking part in certain physical activities _____

Does the member have any allergies or dietary religious restrictions? (check one) No Yes If Yes, please check all applicable

Beef Pork Fish/shellfish Milk/dairy products Peanuts/Peanut butter Tree nuts

Wheat/gluten Other _____

Member's Information **TRANSPORTATION**

My child will arrive to the club from (check all that apply) School Home Other _____

My child will arrive to the club by way of (check all that apply) Walking Parent/Guardian Other _____

My child is authorized to leave the club by way of (check all that apply) Parent/Guardian Sibling Walking Other _____

My child is authorized to be picked up by

Name _____	Phone _____
Name _____	Phone _____
Name _____	Phone _____

PERMISSION: I hereby grant permission for my child/myself to participate in the above-named Community Learning Center (CLC) and Boys & Girls Clubs. In the event of any injury requiring medical attention, I hereby grant permission to the CLC and Boys & Girls Clubs staff (including volunteers) to attend to my son/daughter or myself including seeking medical attention.

WAIVER: I/we recognize that unanticipated situations and problems can arise during CLC and Boys & Girls Clubs activities that are not reasonably within the control of the CLC staff (including volunteers). I/we therefore agree to release and hold harmless the Boys & Girls Clubs Directors, its agents, officer, employees, and volunteers, from any and all liability, claims, suits, demands, judgments, costs, interest and expense (including attorneys' fees and costs) arising from such activities, including any accident or injury to myself or my child and the costs of medical services.

MEDIA/RELEASE: I understand, as parent/legal guardian of the above-named child, that there maybe times when the local news media, national news media and/or nonprofit organizations partnering with CLC and Boys & Girls Clubs request the opportunity to videotape, take photographs and/or interview children within CLC and Boys & Girls Clubs. By signing this, I understand that I am giving permission for CLC and Boys & Girls Clubs to allow media coverage with respect to my child. I also understand that by signing this release, I give permission to the CLC and Boys & Girls Clubs to make or use pictures, slides, digital images, or other reproductions of me, of my minor child, or of materials owned by me or my child, and to put the finished pictures, slides, or images to use without compensation in broadcast productions, publications, on the Web, or other printed or electronic materials related to the role and function of the CLC and Boys & Girls Clubs. I understand that by signing this, I am, on behalf of myself and my child, releasing CLC and Boys & Girls Clubs and its directors, officers, employees and agents, from any future claims as well as from any liability arising from the use of any photograph or other images. This form shall be valid unless revoked in writing by me (parent/legal guardian) to the attention of BGCGM (Mardak Administration Center).

I hereby certify that I have read and do understand the above information:

Signature _____
 Print Name _____ Date _____

Do you Receive WI Shares Child Care or W2?

Please Select One:

<input type="checkbox"/>	Yes, I have an Open WI Shares Child Care Case. My Case Number is: _____ . I will call MECA (1-888-947-6583) to update my Child Care Authorization.
<input type="checkbox"/>	Yes, I receive W2. My Case Number is: _____ . I will contact my FEP worker to update my Child Care Authorization.
<input type="checkbox"/>	No, I currently do not receive WI Shares Child Care or W2. I understand that I <u>must</u> complete the information below to determine if I am eligible.

Signature: _____ Date: _____ Phone Number: _____

Am I Eligible?

Please complete the following information.

All information is required for a completed BGC GM Membership application if you do not have an open WI Shares Child Care or W2 case.

List all Adults in Household		
First Name	Current Health Insurance?	Currently Working?
	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes

Monthly Income Information	
Total Monthly Gross Income for your Household from Job(s):	\$ _____
OR	
Hours Worked Per Week	_____
Amount Earned Per Hour:	\$ _____
Do you receive any Additional Income? Check all that apply:	
<input type="checkbox"/> Child Support <input type="checkbox"/> W2 Payments <input type="checkbox"/> Social Security / SSI <input type="checkbox"/> Unemployment <input type="checkbox"/> Other: _____	
Total Additional Monthly Income Received:	\$ _____

List all Children in Household		
(Continue list on back of sheet if needed.)		
First Name	Child's Age	Current Health Insurance?
		<input type="checkbox"/> Yes
		<input type="checkbox"/> Yes
		<input type="checkbox"/> Yes
		<input type="checkbox"/> Yes
		<input type="checkbox"/> Yes

<p>For Office Use Only:</p> <p style="text-align: center;">Eligible? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Parent Needs to Update Auth</p> <p>If Eligible, Date Contacted: _____ By: _____</p> <p>Notes: _____</p>	<p>Club Location: _____</p>
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BOYS & GIRLS CLUBS MEMBER EXPECTATIONS

Boys & Girls Clubs of Greater Milwaukee (BGCGM) has rules that every member, youth and adult guest must follow to ensure a positive experience for all members. All Club rules are designed and enforced to create a safe, respectful, fun and orderly environment.

Members and guardians receive the Member Expectations (ME) as part of the application process. Any violations of these rules may have consequences varying from a verbal warning to suspension or even termination of membership. Additional rules for specific programs, situations or ages may be set and used by Club staff as needed.

The code of conduct is as follows:

- I will honor the BGCGM Member Expectations when I participate in all Club activities.
- I will respect myself, fellow members, employees, and the facilities.
- I will have my coat, hat and book bag in the designated Club location.
- I will be responsible for all my personal belongings, including electronic devices. I agree not to use my electronic devices while attending Club programming, unless given permission by staff.
- I will remain drug, alcohol and tobacco free at the Club.
- I will use words that are respectful.
- I will report inappropriate behavior that is uncomfortable, unwanted or dangerous.
- I will cooperate with all directions and requests by BGCGM employees.
- I will eat or drink only in designated areas and dispose of garbage properly.
- I will refrain from inappropriately touching other Club members.
- I will only use approved entries and exits as I arrive at or depart from the Club.
- I will remain free of all weapons, including objects that resemble real weapons.
- I will refrain from intimate behavior

All youth (guests and members) must sign the Member Expectations with the membership/guest form. By signing my name, I agree to honor Boys & Girls Clubs' Member Expectations and am prepared to accept the consequences of my actions.

Club Member's Signature

Parent/Guardian's Signature

Date

Date