

# 2019 Hello Summer

**GREAT FUTURES START HERE.**



**BOYS & GIRLS CLUB  
OF GREATER LEE COUNTY**

Administration Office  
1305 Gatewood Drive  
Auburn, AL 36830  
Suite #221  
334-502-1311

Auburn Unit  
Boykin Community Center  
400-B Boykin Street  
Auburn, AL 36830  
334-821-6020

Potter-Daniel (Opelika) Unit  
1610 Toomer Street  
Opelika, AL 36830  
334-745-2582

**Our Mission**

To enable all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens

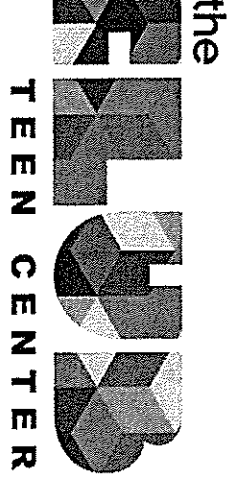
**Our Vision**

To provide a world-class club experience that assures success is within reach of every young person who walks through our doors, with all members on track to graduate from high school with a plan for the future, demonstrating good character and citizenship, and living a healthy lifestyle.

**Academic Success**

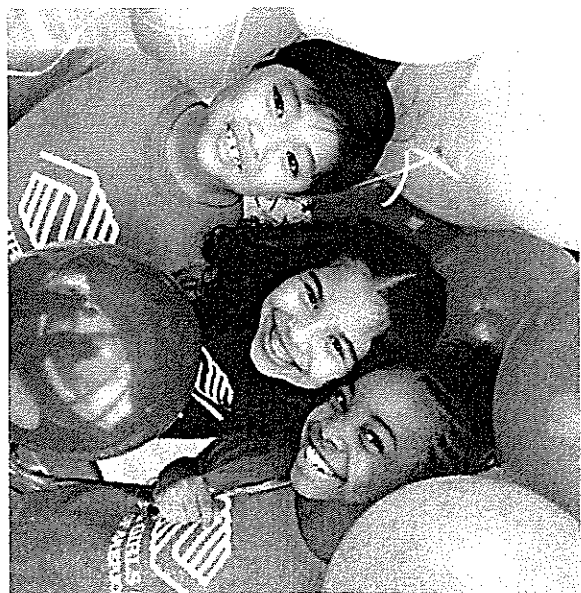
**Character & Leadership Development**

**Healthy Lifestyles**



# SUMMER CAMP 2019

June 3RD – August 2ND 2019



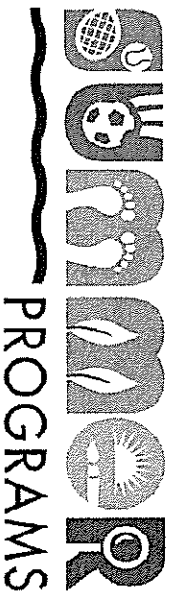
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OF GREATER LEE COUNTY**

Auburn Unit  
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Arts & Crafts

Music

Dance

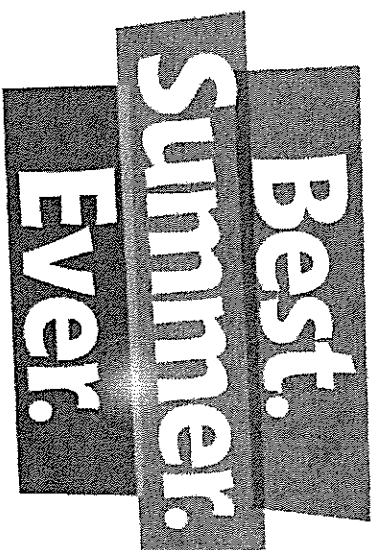
Cheer

Basketball

Football

Baseball

Volleyball



SUMMER DAY CAMP 2019

ATTENTION YOUTH & PARENTS! Join Boys & Girls Clubs of Greater Lee County for the **BEST. SUMMER. EVER.** Day Camp 2019!

REGISTER TODAY! Space IS limited.

ALL REGISTRATION is on a first come, first serve basis.

June 3rd - August 2nd 2019

CLOSED WEEK OF THE 4th of JULY

9:00 AM - 6:30 PM CST

\*Early Bird Available by Request\*

Registration Fee: \$50.00

Weekly Fee: \$50.00

Download your application today at

[www.bgcleeco.org](http://www.bgcleeco.org)

For More Information please contact:

Tenisha King - Auburn Director

Daniel Davis - Potter-Daniel Director



Archerly

Nature Walks

STEM

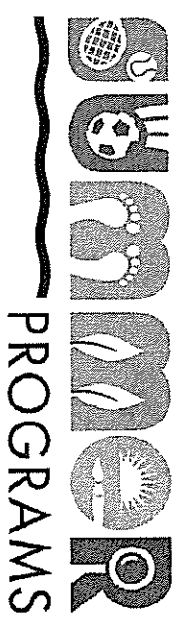
Coding

Brain Games

Water Games

Social Activities

Field Trips



**BOYS & GIRLS CLUBS OF GREATER LEE COUNTY**  
**SUMMER MEMBERSHIP APPLICATION**

Revised March 2016

Unit Director: \_\_\_\_\_

Staff Initial: \_\_\_\_\_

DATE: \_\_\_\_\_ NEW MEMBERSHIP \_\_\_\_\_ RENEWAL \_\_\_\_\_

AUBURN UNIT \_\_\_\_\_ POTTER-DANIEL UNIT \_\_\_\_\_ TEEN \_\_\_\_\_ OTHER: \_\_\_\_\_

PROGRAM ATTENDING- AFTER SCHOOL: \_\_\_\_\_ SUMMER CAMP: \_\_\_\_\_ EARLY BIRD FEE: \$ \_\_\_\_\_

AMOUNT PAID \$ \_\_\_\_\_ (check/cash) REFERED BY: PH: \_\_\_\_\_ DHR: \_\_\_\_\_ FGC of AL: \_\_\_\_\_

WEEKLY-FEE \$ \_\_\_\_\_ MEMBERSHIP FEE \$ \_\_\_\_\_ TRANSPORTATION FEE \$ \_\_\_\_\_

DATE MEMBERSHIP EXPIRES: \_\_\_\_\_ Receipt No. \_\_\_\_\_ CARD # \_\_\_\_\_

ADDITIONAL INFO: \_\_\_\_\_

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THIS INFORMATION WILL BE KEPT CONFIDENTIAL AND USED FOR STATISTICAL PURPOSES ONLY.  
ALL INFORMATION **MUST** BE FILLED OUT FOR APPLICATION TO BE PROCESSED

**PLEASE PRINT IN BLUE OR BLACK INK ONLY**

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ AGE \_\_\_\_\_ SEX \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ APT # \_\_\_\_\_ Race \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_ HOME PHONE # \_\_\_\_\_ CELL # (If Applicable) \_\_\_\_\_

DO YOU HAVE A JOB? \_\_\_\_\_ IF YES WHERE: \_\_\_\_\_

DO YOU PARTICIPATE IN GROUP SPORTS? \_\_\_\_\_ BOY/GIRL SCOUTS: \_\_\_\_\_ 4-H: \_\_\_\_\_ OTHER: \_\_\_\_\_

NAME OF SCHOOL: \_\_\_\_\_ GPA: \_\_\_\_\_ CURRENT GRADE: \_\_\_\_\_

SNAP Case Number: \_\_\_\_\_ TANF Case Number: \_\_\_\_\_  
(\*formerly known as the Food Stamp Program)

SCHOOL LUNCH (Please mark one): FREE \_\_\_\_\_ REDUCED \_\_\_\_\_ PAID \_\_\_\_\_ T-Shirt Size \_\_\_\_\_ Youth Size \_\_\_\_\_ Adult Size \_\_\_\_\_

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**WITH WHOM DO YOU RESIDE?**

BOTH PARENTS \_\_\_\_\_ MOTHER \_\_\_\_\_ FATHER \_\_\_\_\_ RELATIVE \_\_\_\_\_ FOSTER PARENTS \_\_\_\_\_ GUARDIAN \_\_\_\_\_

NAME OF PARENT OR LEGAL GUARDIAN: \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ @ \_\_\_\_\_ .COM

WORK PHONE NUMBER: \_\_\_\_\_ Ext. \_\_\_\_\_ EMPLOYED WITH: \_\_\_\_\_ POSITION \_\_\_\_\_

NAME OF PARENT OR LEGAL GUARDIAN: \_\_\_\_\_

WORK PHONE NUMBER: \_\_\_\_\_ Ext. \_\_\_\_\_ EMPLOYED WITH: \_\_\_\_\_ POSITION \_\_\_\_\_

How many youths under age the age of 18 live in your household? \_\_\_\_\_ Total number of people in your household? \_\_\_\_\_

IS YOUR FAMILY INCOME: Less Than \$10,000 \_\_\_\_\_ \$10,000-\$20,000 \_\_\_\_\_ \$20,000-\$30,000 \_\_\_\_\_ \$30,000 & Above \_\_\_\_\_

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To insure the safety of your child please list other adults to whom your child may be released or who are authorized to provide transportation for your child. PLEASE LIST PHONE NUMBERS. DO NOT LIST PARENTS/GUARDIANS IF THEY ARE LISTED ABOVE.

Name \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ (Home/Cell)

Name \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ (Home/Cell)

Name \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ (Home/Cell)

**IN CASE OF AN EMERGENCY AND PARENT or GUARDIAN CANNOT BE REACHED;**

NAME & ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_ (Home/Cell)

NAME & ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_ (Home/Cell)

PHYSICIAN & ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

Date of last physical: \_\_\_\_\_ Special Medications: \_\_\_\_\_ Explain: \_\_\_\_\_

WHAT ILLNESS DOES YOUR CHILD HAVE? : ALLERGIES \_\_\_\_\_ ASTHMA \_\_\_\_\_ DIABETES \_\_\_\_\_  
EPILEPSY \_\_\_\_\_ HEART TROUBLE \_\_\_\_\_ HEARING \_\_\_\_\_ SPEECH \_\_\_\_\_

Other: Please explain \_\_\_\_\_

Do you have insurance \_\_\_\_\_ Name of Insurance Company \_\_\_\_\_ Ins. Member No. \_\_\_\_\_

.....  
*I certify that I give my child permission to join the Boys & Girls Clubs of Greater Lee County and to appear in pictures of Boys & Girls Clubs activities to be used for publicity purposes. \_\_\_\_\_ (Initial)*

*I understand and agree that my child must be picked up by closing time or a charge of \$5.00 up to 15 minutes late and \$1.00 for every minute thereafter will be assessed per child. Child will not be allowed back into the club until the late fee has been paid. \_\_\_\_\_ (Initial)*

*I understand and agree that the Boys & Girls Clubs of Greater Lee County has an open door policy and cannot be responsible for my child leaving the Clubs without permission. Children are not allowed to participate in activities off Club premises without written permission of parents or guardians. \_\_\_\_\_ (Initial)*

*As parents or guardian of the above child, I approve of His/Her joining the Boys & Girls Clubs of Greater Lee County, and agree not to hold Boys & Girls Clubs of Greater Lee County, its Board of Directors, Officers, Staff or Volunteers responsible and/or liable, and here RELEASE them from liability for losses of any personal property and any injuries or accidents suffered by my child at the Boys & Girls Clubs facilities or in connection with membership or participation in any Boys & Girls Clubs activities. \_\_\_\_\_ (Initial)*

*In the event that I nor the person listed above can be reached in an emergency, I hereby give permission to the physician selected by the Boys & Girls Clubs of Greater Lee County to hospitalize, secure proper treatment for and to order injections, anesthesia, or surgery for my child. I also understand that it is my responsibility to provide up to date contact & address information to the Boys & Girls Clubs of Greater Lee County at all times. \_\_\_\_\_ (Initial)*

*I understand and agree that all fees are due on Monday in advance of each week (Tuesday if a Holiday falls on a Monday) no later than Friday of that same week. If fees are not paid at the designated time, I further understand that my child or children will not be allowed to return to the club until all fees have been paid in full. I also understand and agree that membership fees are non-refundable. \_\_\_\_\_ (Initial)*

*I understand and agree that if transportation is provided for my child from his/her school that if the child is suspended from the B&GC Van it is my responsibility to make other transportation arrangements. If it is indicated by the Unit Director the child may be eligible to continue attending the club. \_\_\_\_\_ (Initial)*

*I understand and agree that attending a Parent Orientation is mandatory and I agree to adhere to the policies of the Club as stated in the Parent/Member handbook. I also agree to further review Club policies with my child, assuming responsibility for their appropriate behavior while in attendance at the Boys & Girls Clubs of Greater Lee County. \_\_\_\_\_ (Initial)*

*I understand and agree that my child is required to follow the dress code of Boys & Girls Clubs of Greater Lee County. If my child does not have on appropriate attire or footwear a parent/guardian will be called to pick up the child or bring the appropriate attire or footwear to the Club for the child to change into. \_\_\_\_\_ (Initial)*

*I understand and agree to my child having access to the internet while attending Boys & Girls Clubs of Greater Lee County. I agree that my child will comply with the guidelines of using the computer as stated in the Technology Policies of the Clubs. I understand and agree*

that violation of these guidelines can result in my child's suspension from the Club. If at anytime I, as the parent/guardian, would like to suspend my child's privilege of using the computer, I must submit a written notice to the Club. \_\_\_\_\_ (Initial)

### APPLICATION FOR MEMBERSHIP – PARENTS / GUARDIANS SIGNATURES

I request that my child be admitted to membership in the Boys & Girls Clubs of Greater Lee County and I will be responsible for any damage or destruction that his/her actions may incur.

Signature, Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

Signature, Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

### APPLICATION FOR MEMBERSHIP – YOUTH MUST READ AND SIGN

If I am accepted as a member of the Boys & Girls Clubs of Greater Lee County, I promise to take care of the building, games, equipment and good name. I will not allow any other person to use my Club membership number. I will be loyal to the Clubs and will respect members of the Clubs and staff at all times. I will be responsible for any equipment destroyed by me.

Signature, Youth Member \_\_\_\_\_ Date \_\_\_\_\_

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