



Universal Signature Form - Ages 13 – 18 School Year 2021-2022

This document must be physically signed and initialed by the teen’s legal parent/guardian. Online registration is not complete until this form, a copy of the child’s Birth Certificate, Immunization Records, current photo, etc. have been submitted. A separate form is needed for each teen enrolled.

Name of Teen: _____ Location: E.A. Tutt or El Pomar

MEDICAL RELEASE:

In case of an emergency involving the teen on this enrollment form, I authorize Boys & Girls Club of the Pikes Peak Region employees & volunteers to use the information in the medical section for emergency medical treatment under the following conditions:

1. An emergency or unanticipated condition requiring actions for the preservation of the life or health of my teen, **and**
2. Reasonable attempts to contact Parent/Guardian/Emergency Contacts have failed.

I further acknowledge that I will be responsible for any medical, hospital fees, or costs associated with my teen’s medical treatment that may proceed without further authorization.

Parent/Guardian Signature _____ Date _____

RELEASE AUTHORIZATION:

Select below to give permission to allow your teen, upon signing out, to leave The Club by:

_____ Walking or _____ Parent/Guardian or Authorized Contact Pick Up ONLY or _____ Both

I understand that once my teen leaves The Club that BGCPPR is not liable.

Parent/Guardian Signature _____ Date _____

PERMISSION TO TRANSPORT (for emergencies & field trips):

I give permission for my teen to be transported by foot or vehicle by the Boys & Girls Club of the Pikes Peak Region or a contracted third-party transportation service in the event of an emergency situation or for field trip purposes. In signing below, I agree to release Boys & Girls Club of the Pikes Peak Region from all liability to me, my teen, and my teen’s personal representative, assigns and heirs for all claims and damages which my teen or I may have in connection with my teen’s attendance at the Club. If, despite this release, my teen, I, or anyone on my teen’s behalf make a claim against the Club, I agree to indemnify and hold harmless Boys & Girls Club of the Pikes Peak Region from any attorney fees, damages, or cost it may incur due to such a claim.

Parent/Guardian Signature _____ Date _____

INTOXICATED PERSONS AT PICK UP:

For the safety of the teens, the BGCPPR has established a procedure in the event of anyone attempting to pick up a teen while under the influence of or impaired by alcohol or drugs. If a staff person suspects intoxication, a conversation will take place and they will call an authorized contact of the teens to pick up. If the individual insists on leaving with the teen, the staff will immediately contact law enforcement and advise them of the situation. Failure to comply with this policy could result in termination of services.

Parent/Guardian Signature _____ Date _____

TRANSPORTATION BY BOYS & GIRLS CLUB VANS:

If transportation will be provided by parent/guardian to the Club, please check here.

Transportation to the El Pomar Club is provided by BGCPPR for ONLY for the following schools. Please mark the school below that your teen will be transported from.

- ____ West Middle
- ____ Holmes Middle

Transportation to our E.A. Tutt Club is provided by BGCPPR for ONLY for the following schools. Please mark the school below that your teen will be transported from.

- ____ James Irwin Charter Middle School
- ____ James Irwin Charter High School
- ____ James Irwin Power Technical (PTEC)

If your teen is being transported by another school, please make note of that below:

____ Other (if their school provides) _____

Please complete the transportation schedule below for your teen so that we can ensure their arrival to our program:

AFTER SCHOOL TRANSPORTATION SCHEDULE:

PM Program (circle days) - Monday Tuesday Wednesday Thursday Friday

If, for any reason, such as an appointment, illness, etc., your teen will be absent you MUST call to let the Branch Director know in advance by at least 12pm of that day. Communication with the Branch Director regarding absences or schedule changes is required for safety purposes. Continual failure to communicate with the Branch Director in regard to changes or cancellations for transportation will result in termination of transportation. This is at the Clubs discretion and for safety purposes.

**El Pomar- 719-473-3490
E.A. Tutt- 719-570-6242**

BGCPPR RELEASE STATEMENTS
(Initials Required)

- _____ I release and hold the Boys & Girls Club of the Pikes Peak Region harmless for any liability, loss, injury, or other damages arising in any way as a result of the teen's participation in program activities.
- _____ I authorize the Boys & Girls Club of the Pikes Peak Region to talk to current Special Education school instructors in order to promote a smooth transition of services from school to after school programming when needed.
- _____ I understand that it is my responsibility to update ALL changes regarding employment status, address, phone numbers for myself or contacts and other relevant information for BGCPPR through the Parent Portal.
- _____ I give permission to Boys & Girls Club of the Pikes Peak Region to provide my teen internet access for the Clubs computer learning center. I understand my teen will lose internet privileges if it is deemed necessary by staff. I understand that I can take back my permission at any time and that my permission automatically stops at the end of the one-year membership period.
- _____ Members and family may be asked to take a non-identifying survey upon registration and asked to take additional surveys during the year.
- _____ I authorize Boys & Girls Club of the Pikes Peak Region to have access to my teen's school records, such as report cards for educational purposes.
- _____ I grant permission to the Boys & Girls Club of the Pikes Peak Region for the member to be used in public relations material-names, pictures, news media coverage, and anecdotes for the purpose of education the public to the services available. I hereby give my consent to use any photographs that may be taken of my teen while registered as a member. **YES** _____ **or** **NO** _____
(Please Initial Yes or No Above)

BY SIGNING BELOW, I AM ACKNOWLEDGING THAT I HAVE READ, UNDERSTOOD AND AUTHORIZED, AS INDICATED BY SIGNATURE OR INITIAL, THE ABOVE RELEASE STATEMENTS.

Parent/Guardian Printed Name _____

Parent/Guardian Signature _____ **Date** _____

Parent/Guardian Address _____

Parent/Guardian Phone Number _____ **Email** _____