Winchester Youth Center

 458R Main Street

 Winchester MA 01890

 781-721-0906

 www.winyc.com

After school Drop-in Center

Membership Application

**School Year 2013-2014**

Office use only

Membership #

Please enclose annual joining fee of $50 per student.

Checks should be made payable to the Winchester Youth Center.

🞎Please check here to request a scholarship.

No one will be denied membership due to financial hardship.

Please PRINT all information. One form per student is required. Additional forms are available.

**Member's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Sex: Male Female**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_\_\_**

**E-Mail Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**1st Parent/Guardian's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2nd Parent/Guardian's Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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After school Drop-in Center

**School Year 2013-2014**

**RULES & REGULATIONS**

**Attendance**: The Drop-in Center is open after school on Mondays and Fridays from 2:15-5:00. Students must have a WYC membership to attend the Drop-in Center after school. *Students are allowed to come and go on a completely voluntary basis.*

**Respect**: All members must treat staff, volunteers, and all other members appropriately and respectfully. No offensive language or behavior will be tolerated. No fighting or inappropriate physical contact will be tolerated. *Everyone is expected to treat others the way they want to be treated.*

**Personal Property**: Jackets, backpacks, sweatshirts, etc. are to be stored on hooks, against the wall and out of the way of all activity areas. *Students are expected to be responsible for their own belongings*; the WYC is not responsible for any personal property. *Students are expected to be respectful of each other’s things and not to touch anyone else’s belongings without permission.*

**Equipment**: All equipment (pool cues, video games controllers, basketballs, etc.) will be checked out using membership cards and must be returned by the end of the day. Members will be held responsible for broken or missing equipment.

**Computers**: Members are only allowed to use the computers in the Homework Room when a Peer Leader is available to provide support and supervision. Members are not allowed to download anything onto the computers and must use them appropriately. If students are using computers for email, instant messaging, etc. they must sign out when they are done and must never attempt to access anyone else's personal accounts.

**Food and Drink**: No drinks are allowed on the pool tables, air hockey table, or computer desks. Members are expected to clean up their own spills. Members are expected to place all of their trash in trash barrels and bottles/cans in recycling bins.

**Substances**: No alcohol, tobacco, or other drugs are permitted anywhere on the WYC premises or at any WYC event.

**Fee**: The individual membership fee is $50 per year. Please make checks out to the Winchester Youth Center. Scholarships are available, simply check the box on the first page.

**Acknowledgement**: I have read, understand, and agree to the above policies, rules, and regulations. *I agree to treat others the way I want to be treated, be respectful of all WYC staff, and take care of all WYC space and equipment.* I understand that violations of any of these rules, regulations, or policies may result in loss of WYC privileges and termination of membership.

Member's Signature Date

Parent/Guardian’s Signature Date

Winchester Youth Center

**MEDICAL RELEASE FORM**

CONSENT FOR MEDICAL TREATMENT (MINORS)

In the unlikely event that medical attention may be necessary for my child, I give my consent for

emergency medical treatment of my child .

Signature of Parent/Guardian:

\*Please note: In the event of an emergency the WYC staff will call 911 and then immediately contact the Parent/Guardian.

Medical concerns: (Ex. "My child is allergic to…")

**GENERAL RELEASE**

In enrolling my child as a member at the Winchester Youth Center's after school Drop-in Center, I understand that my child assumes any and all risks which might be associated with its activities and waive and release all rights and claims for the damages which my child, heirs, executors, administrators, assigns or I may have against Winchester Youth Center, the Town of Winchester, and/or the Winchester Recreation Department, its directors, officials, or representatives for any and all injuries or damages of any kind suffered as a result of participation in the membership of the Winchester Youth Center.

Signature of Parent/Guardian: Date:

**PHOTO RELEASE OF LIABILITY**

I grant the Winchester Youth Center the right to use photographs, video tapes, and sound recordings of my child for public relations, websites, brochures, pamphlets, and/or advertising for the Winchester Youth Center.

Signature of Parent/Guardian: Date: