

School Year 2026-2027 GAMES & MOVEMENT



BOYS & GIRLS CLUBS
OF THE LOS ANGELES HARBOR

Dear Parents/Guardians,

Welcome to our After School Program and thank you for your interest in our program.

To ensure a successful year, we would like for you to carefully read the following conditions before signing:

Enrollment:

- All students attending enrolled in school 6th through 8th grade, are eligible to attend the afterschool program.
- Parents/guardians must completely fill out a membership application and must attend an orientation.
- Please keep all phone numbers, address, and emergency contacts up to date with the school and BGCLAH.

Attendance:

- It is your student's responsibility to sign in each and every day that they attend BGCLAH after school program. They must meet at the designated area specified for their grade and/or program.
- **It is the parent's/guardian's responsibility to sign their student out every day that they sign in,** or have those who are picking the student up to sign out the student.

Safety:

- Students will only be released to their parents/guardians or those listed on the emergency section of the application form. **(They must have a valid ID, and must be at least 18 years of age.)**
- If for any reason the parent/guardian or those listed on the emergency section of the application are unable to pick up the student, parent/guardian must send an e-mail to Site Coordinator prior to pick up. **The e-mail must include the name and phone number of the person that will pick up your student that day. (They must be at least 18 years of age and have a valid ID upon pick up.)**
- Middle school students must have a signed Early Release Policy form on file which allows or denies permission for the students to sign themselves out.

Programs:

- Our after school program provides high-quality programs and activities in Academics, Arts and Athletics throughout the school year.
- We offer homework assistance and other core programs daily.
- In addition, our program provides a nutritious supper everyday!

Evaluations have shown that students who participate in an after school program regularly show improvement in regular school attendance, behavior, test scores, and grades! Please sign up your child as soon as possible!! If you have any specific questions about the program and its content, please contact the Site Director via e-mail. Thank you.

Sincerely,
Hilda Chacon
Regional Director of Harbor City
(310)833-1322 ext. 610
HildaC@bgclaharbor.org

Late Pick-Up Policy

The intent of our “Late Pick-Up” Policy is to ensure that parents/guardians pick-up their children in a timely manner.

This is important for both the safety of the children and to ensure that the staff is able to leave on time.

The following are the specific steps taken for “Late pick-up” of members:

Warning

Parents are warned of this policy both verbally and by signing this Contract that defines our “Late Pick-Up” policy and the ramifications for each offense.

1st Offense: \$1 per minute starting five minutes passed closing.

*Child may not return to the Club until late fee payment is paid in full and/or specified by Site Director/Coordinator.

2nd Offense : \$1 per minute for EACH additional minute after designated closing time.

*Child may not return to the Club until late fee payment is paid in full

*Child may not participate in the Club activities or field trips until late fee is paid in full, prior payments for such activities or field trips **will not** be refunded.

3rd Offense

Your child is automatically “Suspended” from ALL sites of the Boys & Girls Clubs of the Los Angeles Harbor (any Main Sites and any School Site)

***After 1 hour of closing the child will be transported to the Police Station and left there as “Abandoned” by the parent.**

The following are the specific steps taken for “Late pick-up” of member: I have read the above policy, and I understand that this is the only warning that I will receive. I understand and realize that my child will not be able to return to the Boys & Girls Club of the Los Angeles Harbor and participate in the Club activities and field trips until the late fee payment is paid in full. Payments of the Club activities and field trips will not be refunded. Furthermore, I understand all the ramifications of each offense.

Dress Code

All members are encouraged to dress in a manner that allows full participation in our programs. Members will have an option to either change the clothing that has been deemed inappropriate or be sent home for violating dress code. The following items are violations of the club's dress code policy.

1. Closed toe shoes are to be worn while at the Club. No Crocs or any backless shoes.
2. Half-shirts, spaghetti straps, skirts above mid-thigh and/or any clothing that does not cover the chest to the mid-thigh, spaghetti straps and shirts that do not cover the back, chest or midriff are not allowed. No Volleyball Shorts
3. Clothing that demeans women, men, or any other group.
4. Vulgar or sexually explicit graphics or words on clothing.
5. Gang symbolism and attire are not allowed at the Club. (Solid red and/or blue shirts, visible tattoos or markings that are identified as vulgar or gang related.)
6. Pants hanging below the belt line.

Rules & Policies

1. Members are responsible for their own belongings; the Club is unable to replace any lost, stolen or damaged property.
2. Behave appropriately when on BGC site.
3. Telephones are for business use only. In the event of an emergency, members may use the phone to call home with staff permission.
4. Parent/Guardians are liable to replace and/or pay for any BGC equipment that is damaged by members.
5. Please wear closed toes shoes at all times. Rubber soled shoes are required in the gym.
6. Outside food and drinks cannot contain anything with nuts. BGC is a nut free facility.
7. The use of tobacco, drugs, alcohol, Vape Pens as well as smoking and gambling in or around the club are prohibited and will result in a suspended membership.
8. Parents/Guardians and members must follow sign in/out procedures located at the front desk. The front of the Club must remain clear at all times.
9. BGCLAH provides home assistance for the first 30 minutes of our programming. Parents/Guardians are still responsible to review and/or complete all homework with member.
10. Any request regarding participation, payments and/or other requests require a 24 hours notice. No request and/or reports will be generated at the time of request.

Member Expectations

1. Be considerate of our neighbors, their property, and yards.
2. The Club is a safe place to come and be with friends. Members are expected to be respectful to all staff, members, visitors and the general public.
3. Keep your hands to yourself. Hitting another member is grounds for suspension. If you have any problems, needs help or have any questions, please ask the staff for assistance.
4. Please respect other members' property. If any member is caught stealing, they will be suspended.
5. Cell phone use is prohibited during club hours.



New Member to BGCLAH?: ☐ Yes ☐ No

If no, please select the BGCLAH site previously attended: _____

Does this member have current or past siblings enrolled in this program? ☐ Yes Name(S): _____ ☐ No

Member Information

Please print clearly. Only Black or Blue Ink

First Name: _____ Middle: _____ Last Name: _____

Age: _____ Birthdate: ____/____/____

Gender: ☐ Female ☐ Male ☐ Transgender ☐ Non-binary

Race/Ethnicity: ☐ African American ☐ Hispanic/Latino ☐ Native Hawaiian or Pacific Islander ☐ American Indian

☐ Asian ☐ Caucasian ☐ Other: _____

Address: _____ Apt. _____ City: _____ State: _____ Zip Code: _____

School Information

Name of School: _____ Grade: _____

Parent/Guardian Information

Important: to avoid delays in processing, please complete ALL requested information

Primary Contact Relationship to Member: _____ Lives in Same Household as Member? ☐ Yes ☐ No

First Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____
(If different from members:)

Home Phone: (____) ____ - ____ Cell: (____) ____ - ____ E-mail: _____

Secondary Contact Relationship to Member: _____ Lives in Same Household as Member? ☐ Yes ☐ No

First Name: _____ Last Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Home Phone: (____) ____ - ____ Cell: (____) ____ - ____ E-mail: _____

Emergency Contact Information

Two people who can be contacted if you cannot be reached. Please do not list parents/guardians

Contact 1 First Name: _____ Last Name: _____ Relationship: _____

Home Phone: (____) ____ - ____ Cell: (____) ____ - ____ E-mail: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Authorized to pick member up? ☐ Yes ☐ No

Contact 2 First Name: _____ Last Name: _____ Relationship: _____

Home Phone: (____) ____ - ____ Cell: (____) ____ - ____ E-mail: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Authorized to pick member up? ☐ Yes ☐ No

BGCLAH Office Only-Do Not Fill In

BGC ID#: _____ LAUSD#: _____ Unit: _____ Start Date: _____ Recd by/Date: _____ Entered by/Date: _____

Medical Information

Member's First Name: _____ Middle: _____ Last Name: _____

Age: _____ Birthdate: _____ / _____ / _____
Month Day Year

Health Insurance Company: ☐ Anthem BlueCross ☐ Kaiser Permanente ☐ Health Net ☐ Blue Shield of California ☐ L.A. Care
☐ Molina Healthcare ☐ Medi-Cal ☐ Aetna ☐ United Healthcare ☐ Cigna ☐ Other: _____

Policy Number: _____ Group Number: _____

Name of Doctor/Medical Office: _____ Phone Number: (____) ____ - ____

Allergies ☐ Please check here if your child does not have any known allergies

Food: ☐ Peanuts ☐ Tree Nuts ☐ Dairy/Lactose ☐ Seafood/Shellfish ☐ Other: _____

Medicine: ☐ Penicillin ☐ Aspirin ☐ Other: _____

Environmental: ☐ Bee Stings ☐ Pollen ☐ Dust ☐ Mold ☐ Grass ☐ Other: _____

Other: _____

Medical Conditions ☐ Please check here if your child does not have any known medical condition

☐ Asthma ☐ Diabetes ☐ Hearing Impairment ☐ ADHD ☐ Autism ☐ Seizures ☐ Blindness

☐ Other: _____

Medications ☐ Please check here if your child does not take any medications

Please indicate any medication this member is presently taking and include the routine in which the medicine is taken:

Household Information *Your families financial information helps BGCLAH apply for grants and corporate donations (so we can keep program fees affordable). All information is kept strictly confidential.*

Family Setting:

Is member in foster care? ☐ Yes ☐ No **Single Parent/Guardian Household?** ☐ Yes ☐ No ☐ Parents/Guardians have joint custody

Head of household: ☐ Female ☐ Male ☐ Both

Does this member live with their: ☐ Both Parents ☐ Mother ☐ Father ☐ Step Mother ☐ Step Father ☐ Grandparent/s ☐ Foster Parent ☐ Other: _____

Annual Household Income:

☐ \$0-9,999 ☐ \$10,000-19,999 ☐ \$20,000-29,999

☐ \$30,000-39,999 ☐ \$40,000-49,999 ☐ \$50,000-59,999

☐ \$60,000 or More

Total Household Size : _____ Number of children under 18 yrs: _____

Check all that apply:

☐ Social Security (SSI) ☐ School Lunch ☐ Veteran Compensation

☐ TANF ☐ Cal WORKs Identification No. _____

☐ SNAP (food stamps) ☐ Social Security Disability (SSD)

Current Living Situation:

☐ Public Housing ☐ Section 8 ☐ Shelter ☐ Temporary Situation

☐ Lives with relatives or friends ☐ Other: _____

Military:

Parent/Guardian Active Military Duty? ☐ Yes ☐ No

If yes, which branch: _____

Live on Military Base? ☐ Yes ☐ No

I confirm that all the information entered above is true and correct to the best of my knowledge

Parent /Guardian Name

Parent/Guardian Signature

Date

Parent/Guardian Consents, Please *initial* and *sign* below.

“USDA is an equal opportunity provider and employer.”

The Boys & Girls Clubs of LA Harbor prohibits any form of discrimination against any person on the basis of race, color, religion, sex, gender, pregnancy, age, national origin, disability, sexual orientation, marital status, status as a victim of domestic violence, citizenship or immigration status, creed, genetic predisposition or carrier status, unemployment status, partnership status, military status, or any other applicable legally protected status in the administration of its membership policies, employment, scholarship and athletic and other Club's -administered programs and functions.

BGC Safe Passage Policy: I understand the Club has adopted a Safe Passage Policy that prohibits members from coming and going as they please. The club has created sign in and out procedures for each grade level, with parent authorization. I understand that once a child has entered the building, they will not be allowed to leave until a parent/guardian/authorized adult arrives to retrieve them. I understand that the club is not a licensed day care facility and that staff will not physically restrain children who insist on leaving without parent permission. Please see front page parent letter for more details on sign/out policies. **Please initial:** _____

Grant Requirement: I understand that I am registering my child into the ASES (After School Education & Safety) program presented by the Boys & Girls Club of Los Angeles Harbor for the school site listed on enrollment form. My child is expected to participate in the program Mon-Fri until 6pm unless an Early Release Form is on file. I understand that I am responsible for signing my child out of the program at the end of each day.

Please initial: _____

School Information: I give permission for the report cards and standardized test scores of my child to be made accessible to the Boys & Girls Clubs of the Los Angeles Harbor (BGCLAH). My child has been enrolled in one of the following programs: 21st CCLC or ASES of BGCLAH and they are utilizing these records to analyze the effect their assistance has had on my child. I will provide BGCLAH with any of my child's report cards or standardized test results that they may request. **Please initial:** _____

Public Relations Materials: I give my consent and permission for my child to have their picture and/or name in newspapers, newsletters, and/or any other promotional materials for the Boys & Girls Clubs of the Los Angeles Harbor (BGCLAH), as well as audio or video records, and for use or distribution in other non-BGCLAH publications, electronic or otherwise, without notifying me. I also agree to allow BGCLAH to use photographs, audiotapes, video records or other work produced by my child for publicity purpose. I hereby waive any right to inspect or approve any of the above that may be used now or in the future, whether that use is known to me or unknown, and I waive any right to royalties or other compensation arising therefrom.

Please initial: _____

Medical: In the event of an accident or emergency, when a parent/guardian is unavailable, I hereby authorize a representative of BGCLAH to make such arrangements as he/she considers necessary for my child to receive medical/hospital care, including necessary transportation under such circumstances, I further authorize the physician to undertake such care and treatment to be performed by a licensed physician or surgeon. **Please initial:** _____

Parent Release: I, the parent/guardian of the minor child listed on this application, for ourselves, our hires, executors, and administrators, hereby release, waive, acquit, and forever discharge BGCLAH, and Boys & Girls Club of America, their representatives, successors, insurers, assigns or any other person or entity associated with any of the above organizations such as staff, directors or volunteers, from all liability, claims, demands, or courses of action for any and all loss, damage, injury, or death and any claim of damages resulting from use of facilities owned or controlled by the above organizations, or participation in activities of said organizations either at or away from the Club. **Please initial:** _____

Surveys/Questionnaires: I understand that for the purpose of evaluations and improvement of our programs, my child may participate in surveys given by Boys & Girls Clubs of America, Los Angeles Unified School District, and/or our organization. **Please initial:** _____

Communicable Disease: A member suspected of having a communicable disease will be excluded from club activities until guidelines for readmission are met. Guidance in addressing communicable diseases comes from the Center for Disease Control and Prevention and national organizations. Temporary exclusion of a member from club activities generally occurs for communicable diseases, including, but not limited to, the following conditions: conjunctivitis (pink eye), skin infections (impetigo), strep throat, chickenpox, scabies, head lice, pertussis (whooping cough), and COVID-19. Readmission to club activities is based on condition and appropriate treatment. **Please initial:** _____

Miscellaneous: I understand the BGCLAH is not, nor claims to be, a licensed day care center. **Please initial:** _____

Disclaimer: I certify that the application is factual and complete to the best of my ability. I hereby give permission for the child listed on the application to become a member of BGCLAH. I understand BGCLAH is not responsible for personal injury or loss of personal property and that I will be financially responsible for any intentional damage or vandalism to the Club caused by my child. I understand participation is contingent upon a commitment to attend an orientation session prior to participation. It is understood that the code of conduct will be adhered to and a member's failure to comply may result in membership termination. **BGCLAH requires a 48 hours wait to process new enrollments.** **Please initial:** _____

Personal Records: I understand that I am responsible to ensure that all personal information maintained by BGCLAH is correct and up to date. I must notify BGCLAH IMMEDIATELY if I have a new address, phone number, emergency contact, any changes in the family settings, health and/or an important information that could have an effect in my child(ren) participation of the program. **Please initial:** _____

Your child's membership is contingent on them following the rules stated on the Dress Code and Policies/Procedures page.
Please initial: _____

Parent /Guardian Name

Parent/Guardian Signature

Date

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4. Please respect other members' property. If any member is caught stealing, they will be suspended.
5. Cell phone use is prohibited during club hours.

I have read the complete application and I understand the rules, policies and dress code. By signing below I agree to these policies and conditions and I have explained the rules, policies and dress code to my child.

Parent /Guardian Name

Parent/Guardian Signature

Date