



**BOYS & GIRLS CLUB**  
OF MANCHESTER

555 Union Street, Manchester NH 03104  
(603) 625-5982

## Membership Application

July 1, 2024 – June 30, 2025

\$25 first child / \$20 second child / \$15 third child

Membership fees are non-refundable

**FOR OFFICE USE**

Date Received: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

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

Receipt #: \_\_\_\_\_

Military Parent in Household

<b>MEMBER INFORMATION:</b>					
First Name:		Middle Name:		Last Name:	
Nickname:		Birth Date:		Age:	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-Binary <input type="checkbox"/> Transgender <input type="checkbox"/> Other : _____		Member Status: <input type="checkbox"/> New Member <input type="checkbox"/> Former Member			
Ethnicity (check all that apply): <input type="checkbox"/> Black <input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> European <input type="checkbox"/> Other: _____					
Primary Language: <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/> Other: _____					
Home Address:					
City:		State:		Zip:	
School in Fall 2024:				Grade in Fall 2024:	
<b>FAMILY/GUARDIAN INFO:</b>					
Legal Guardian First Name:			Legal Guardian Last Name:		
Relation to Child:			Primary Cell Phone:		
Primary Email Address:			Secondary Phone:		
Legal Guardian Employer:			Work Number:		

Secondary Legal Guardian First Name:	Secondary Legal Guardian Last Name:
Secondary Legal Guardian Relation to Child:	Secondary Legal Guardian Cell Phone:
Secondary Legal Guardian Employer:	Secondary Legal Guardian Work Phone & EMAIL:
Members Lives With: <input type="checkbox"/> Both <input type="checkbox"/> Primary Guardian <input type="checkbox"/> Secondary Guardian <input type="checkbox"/> Grandparent <input type="checkbox"/> Other _____	
Medical Disability ** explain medical, physical, emotional or behavior issues: _____ <input type="checkbox"/> Asthma <input type="checkbox"/> Diabetes <input type="checkbox"/> Hearing impairment <input type="checkbox"/> Visual impairment <input type="checkbox"/> ADHD <input type="checkbox"/> Autism <input type="checkbox"/> Seizures <input type="checkbox"/> Anxiety/Depression <input type="checkbox"/> Oppositional Defiant Disorder <input type="checkbox"/> Learning Disability Allergies: _____ *Medications to be administered while attending BGCM Program: _____ <p style="text-align: center;">*Medication Form MUST be completed by physician and parent</p>	

**Emergency Contact Person(s):** You are required to list at least one other person who lives nearby and could assume responsibility for your child if you could not be reached immediately in an emergency.

Name	Relation to Child	Cell Phone:
_____	_____	_____
_____	_____	_____

**The following people are allowed to pick up my child:**

Name	Relation to Child	Cell Phone:
_____	_____	_____
_____	_____	_____

**The following people are NOT legally allowed to pick up my child:** Submit any supporting legal documentation stating person cannot pick up.

Name	Relation to Child	Cell Phone:
_____	_____	_____
_____	_____	_____

I agree to follow the rules and policies explained in the Member Behavioral Expectations of Boys & Girls Club of Manchester (BGCM). I realize that membership to BGCM is a privilege, and if I can't follow the rules and policies, the Club membership could be in jeopardy, leading to possible removal. I understand that if a member is suspended or expelled from BGCM's programs, a refund will not be issued. I understand that under the behavior management protocol, BGCM reserves the right to suspend a member from the program and bussing effective the next day, so it is my responsibility to make alternative care arrangements in advance. I know BGCM has an Open-Door Policy for their Union St. Clubhouse for members in grades 6-12.

I understand that:

- BGCM Union Street Clubhouse is not subject to licensure under RSA 170-E:4. All grievances by parents or guardians concerning the Club Program go through the office manager, who will inform the appropriate Club contact.
- Photographs in which my child appears have the chance to be used in Club marketing materials, promotions, recognition, displays, and other Club-related publicity. In addition, the Club can upload all photographs and videos in which my child may appear on official BGCM social media sites.
- My child will have the opportunity to complete Club surveys used to measure the effectiveness of the Club program.
- I realize my child/children may participate in activities and programs that are physical and, as a result, may be at risk for injury. In consideration for being allowed to participate in any activities, I agree to assume such risk and further agree to hold harmless BGCM, its staff, and volunteers from any claims, suits, losses, or related causes of actions for damages including, but not limited to, such claims that may result from injury or death, accidental or otherwise, during, or arising in any way from the participation in the activities of the program.
- The Club Tax ID is on receipts given at time of payment or you can access information on Procure. Year-end tax statements are not provided.
- For members' security and safety, individuals in our facilities and riding in our vehicles may be under video surveillance.
- Grade K - Grade 5 members are not allowed to use their internet-capable devices while at the Club, and grade 6-12 members are permitted under staff supervision. All members using a Club internet-capable device will only be allowed under staff supervision and is subject to site filtering.
- Continued membership to BGCM is determined based on the child's behavior and the behavior of the parent/guardian.
- If I need to withdraw my child from a program, a two-week written notice is required.
- The membership fee is non-refundable.

**School Program payments:** All weekly fees are due on Friday for school program payments. If payments are late a \$10.00 late fee will be added to your account. If you are late three times you will be required to enroll in autopay with a valid checking/savings account or credit/debit card. If autopay is declined twice, your only option to remain in the program is to pre-pay the fees for the remainder of the year. If you miss your payment two weeks in a row, we will remove your child from our program. Payments can be made through your account at myprocare.com, in person, or by calling the office.

**Summer Camp payments:** All weekly fees are due on Monday for camp program payments. If payments are late, a \$10.00 late fee will be added to your account. If your payment and late fee are not paid by end of day Wednesday your deposit will be forfeited and your spot will not be held. Payments can be made through your account at myprocare.com, in person or calling the office.

Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please direct any questions regarding your account to  
Kim Kuehl, Office Manager, at 625-5982 x 225 or [Kkuehl@mbgcnh.org](mailto:Kkuehl@mbgcnh.org).

Total Number Living in Household: \_\_\_\_\_

Please Circle your total household income below:

Family Income	\$0-\$21,000	\$21,001-35,000	\$35,001-55,950	\$55,951+
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Boys & Girls Club of Manchester  
2024-25 School Year Registration

First and last week program fees must be pre-paid at time of registration

Member Name: \_\_\_\_\_

Grades K-2

- After School Program Only \$90 per week
- Before School Program Only \$60 per week
- Afterschool & Before School \$125 per week

Grades 3-5

- After School Program Only \$90 per week
- Before School Program Only \$60 per week
- After School & Before School \$125 per week

Grades 6-8

- Transportation After School \$50 per week
- Before School Program Only \$50 per week
- Before and After School Transportation \$60 per week

- Highland Goffes Falls
- Jewett St School
- Gossler

- After School Program Only \$90 per week
- Before School Program Only \$60 per week
- After School & Before School \$125 per week
- Part Time – 10 Days \$195

Amount Paid: \$ \_\_\_\_\_ Start Date: \_\_\_\_\_

Snow Days - No fee for program members / \$25 all others (7AM to 5PM)

February/April Vacation (7AM to 6PM)  
\$125 per week / \$150 within a week of start date

- Weekly payments are due by 6PM on Fridays every week regardless of the number of days your child attends or the number of days of school that week. A \$10 late fee will be added to all accounts paid late. Consistent late payments can be reason for suspension from the program.
- Should the Club or site be closed at the end of a week, then payments will need to be made no later than the first day the Club or site is open for the following week
- Payments may be placed in the drop box at the program site. If paying by check, please put the member's name in the memo area of the check for clear identification. No receipt is given for payment by check. If you pay by cash, please enclose it in an envelope with the member's name on it and request a receipt from a member of the site staff.
- All cancellations must be submitted in writing to the Administrative Office. You will be billed for services until written notification is received.
- In the event of a mistake in logging your payment you must provide the canceled check or cash receipt to verify payment.
- If you choose to pay by the month, please be aware that some months may have 5 payments due during that month. It is your responsibility to make the appropriate payment for the month. Should you not make the correct payment you will receive a late payment notice for the fifth week if you forget and you will be obligated to pay the associated late fee.
- All payments are entered, and late payment notices are prepared at the Administrative Office. All questions regarding the status of your son/daughter's account should be directed to Kim Kuehl. She can be reached at 625-5982 x 225. Please email Kim if you need a receipt for childcare reimbursement funds/programs.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Our program has benefited from funding provided by the City of Manchester Community Improvement Program, through the U.S. Housing and Urban Development Community Development Block Grant Program. The Program requests income verification and other statistics from applicants. This information will not be shared and will remain confidential.

**Member Name(s)** \_\_\_\_\_

Male    Female    Non-Binary    Transgender    Other: \_\_\_\_\_

HUD FY 2025 INCOME GUIDELINES:	2025 MEDIAN FAMILY INCOME MUST CIRCLE ONE BELOW		
FAMILY SIZE			
<b>1 PERSON</b>	<b>0-24,050</b>	<b>24,051-40,050</b>	<b>40,051-64,050</b>
<b>2 PERSON</b>	<b>0-27,450</b>	<b>27,451-45,800</b>	<b>45,801-73,200</b>
<b>3 PERSON</b>	<b>0-30,900</b>	<b>30,901-51,500</b>	<b>51,501-82,350</b>
<b>4 PERSON</b>	<b>0-34,300</b>	<b>34,301-57,200</b>	<b>57,201-91,500</b>
<b>5 PERSON</b>	<b>0-37,050</b>	<b>37,051-61,800</b>	<b>61,801-98,850</b>
<b>6 PERSON</b>	<b>0-41,960</b>	<b>41,961-66,400</b>	<b>66,401-106,150</b>
<b>7 PERSON</b>	<b>0-47,340</b>	<b>47,341-70,950</b>	<b>70,951-113,500</b>
<b>8+ PERSON</b>	<b>0-52,720</b>	<b>52,721-75,550</b>	<b>75,551-120,800</b>

For Member Only (please check only one)	
RACE	ETHNICITY
<input type="checkbox"/> White	
<input type="checkbox"/> Black/African American	
<input type="checkbox"/> Asian	
<input type="checkbox"/> American Indian/Alaskan Native	
<input type="checkbox"/> Native Hawaiian/Other Pacific Islander	
<input type="checkbox"/> American Indian/Alaskan Native & White	
<input type="checkbox"/> Asian and White	
<input type="checkbox"/> Black/African American & White	
<input type="checkbox"/> American Indian/Alaskan Native & Black/African American	
<input type="checkbox"/> Asian/Pacific Islander	
<input type="checkbox"/> Other Multi Racial	

\_\_\_\_\_ Total Number Living in Household

- Female Head of Household
- Member Disabled

Does the member have any special/medical needs? \_\_\_\_\_

Home Address: \_\_\_\_\_

I declare that all information provided above regarding household income is true and correct. I understand that knowingly providing false or incomplete information is unlawful and can lead to prosecution for fraud.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## 2024-25 Payments

Two weeks due at time of registration

Week of 9/4 and 9/9 paid at time of registration

Accounts must be two weeks ahead at all times

Payment due	for week of	Payment due	for week of
9/6	9/16	2/7	2/17
9/13	9/23	2/14	3/3
9/20	9/30	2/21	3/10
9/27	10/7		
		3/7	3/17
10/4	10/14	3/14	3/24
10/11	10/21	3/21	3/31
10/18	10/28	3/28	4/7
10/25	11/4		
		4/4	4/14
11/1	11/11	4/11	4/21
11/8	11/18	4/18	5/5
11/15	11/25	4/25	5/12
11/22	12/2		
11/26	12/9	5/9	5/19
		5/16	5/26
12/6	12/16	5/23	6/2
12/13	1/6	5/30	6/9
1/3	1/13	6/6	6/16
1/10	1/20		
1/17	1/27		
1/24	2/3		
1/31	2/10		





\*\*This consent will be shared with the Manchester School District.

MANCHESTER SCHOOL DISTRICT  
SCHOOL ADMINISTRATIVE UNIT NO. 37  
20 Hecker Street  
Manchester, NH 03102  
Telephone: 603.624.6300 • Fax: 603.624.6337

**Jenn Gillis**  
Superintendent of Schools

**Diane Fitzpatrick**  
CEO-Boys & Girls Club of Manchester

**CONSENT FOR RELEASE OF STUDENT RECORDS**

The undersigned parent/guardian or eligible student (*as appropriate*) hereby authorizes the release of the education records of \_\_\_\_\_ (**Name of Student**) by the **Manchester School District** to the **Boys & Girls Club of Manchester**.

The specific records to be released are as follows:

- \*Student Attendance Records
- \*Disciplinary Records
- \*Quarterly Academic Report Card and related grades and course assignments
- \*Other academic records available to the Boys & Girls Club on the MSD Aspen academic portal.

Records designated should be released and disclosed only to the **Boys & Girls Club of Manchester** for the purpose of your child’s participation in the Boys & Girls Club of Manchester’s **Academic Case Management Program**.

I understand that this consent is voluntary and will remain in effect while my son/daughter remains a member of the Club; that I am entitled to review the above education records; that I may revoke this consent at any time by notifying the Manchester School District in writing; and that any such revocation will take effect upon receipt except to the extent that records have already been disclosed in reliance upon this consent.

<b>Child’s Name</b>	<b>Grade</b>	<b>Date</b>
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<b>Print Name of Parent/Guardian</b>	<b>Signature of Parent/Guardian</b>
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DATE	DESCRIPTION	CLUBHOUSE & SITE HOURS
WED., SEPT. 4, 2024	UNION ST. CLUBHOUSE BEFORE & AFTER SCHOOL PROGRAMS BEGIN	6:15AM-8:00AM & 2PM-7PM **TWEENS & TEENS ONLY: 2-8PM
TUES., SEPT. 10, 2024	CITY PRIMARY VOTING DAY - NO SCHOOL	UNION ST. CLUBHOUSE OPEN 7AM-6PM
FRI., OCT. 11, 2024	TEACHER WORKSHOP DAY	UNION ST. CLUBHOUSE OPEN 7AM-6PM
MON., OCT. 14, 2024	COLUMBUS DAY - NO SCHOOL	CLOSED
WED., OCT. 23, 2024	HALL OF FAME CELEBRATION	UNION ST. CLUBHOUSE CLOSSES AT 5PM
TUES., NOV. 5, 2024	CITY ELECTION VOTING DAY - NO SCHOOL	UNION ST. CLUBHOUSE OPEN 7AM-6PM
MON., NOV. 11, 2024	VETERANS DAY - NO SCHOOL	CLOSED
NOV. 27 - NOV. 29, 2024	<b>THANKSGIVING RECESS - NO SCHOOL</b>	CLOSED
TUES. DEC. 10, 2024	STAFF HOLIDAY PARTY	UNION ST. CLUBHOUSE CLOSSES AT 5PM
DEC. 23, 2024 - JAN. 1, 2025	<b>CHRISTMAS RECESS - NO SCHOOL</b>	CLOSED
THURS., JAN. 2, 2025	PROGRAM RE-OPENS	6:15AM-8:00AM & 2PM-7PM **TWEENS & TEENS ONLY: 2-8PM
MON., JAN. 20, 2025	MARTIN LUTHER KING, JR. DAY - NO SCHOOL	CLOSED
MON., FEB. 17, 2025	PRESIDENTS DAY - NO SCHOOL	CLOSED
FEB. 24 - FEB. 28, 2025	<b>WINTER SCHOOL VACATION CAMP (EXTRA FEE REQUIRED)</b>	UNION ST. CLUBHOUSE OPEN 7AM-6PM
MON., MAR. 17, 2025	TEACHER WORKSHOP DAY	UNION ST. CLUBHOUSE OPEN 7AM-6PM
APR. 28 - MAY. 2, 2025	<b>SPRING SCHOOL VACATION CAMP (EXTRA FEE REQUIRED)</b>	UNION ST. CLUBHOUSE OPEN 7AM-6PM
MON., MAY 5, 2025	PROGRAM RE-OPENS	6:15AM-8:00AM & 2PM-7PM
MON., MAY 26, 2025	MEMORIAL DAY - NO SCHOOL	CLOSED
WED., JUNE 11, 2025	AWARDS NIGHT	UNION ST. CLUBHOUSE CLOSSES AT 5PM
TUES., JUNE 17, 2025	UNION ST. CLUBHOUSE SCHOOL PROGRAM ENDS	
MON., JUNE 23, 2025	CAMP FOSTER SUMMER CAMP BEGINS	

\*GRADES K-5 MEMBERS MUST BE PICKED UP BY 7PM.

\*UNION ST. CLUBHOUSE IS OPEN ON MOST SNOW DAYS, 7AM-5PM, NO FEE FOR CLUB PROGRAM MEMBERS, ALL OTHERS \$20 FEE.

\*LATE PICK-UP FEE OF \$1/MINUTE IS CHARGED FOR PICK-UPS AFTER 7PM. A MAXIMUM OF \$30 CHARGED.

\*SINGLE DAY DROP OFF SERVICE AVAILABLE FOR BEFORE SCHOOL PROGRAM, \$10 FEE.

\*MEET THE LEADERS NIGHT, DATE TBD, CLUB CLOSSES AT 5PM.

\*JEWETT ST., GOSSLER PARK, & HIGHLAND-GOFFE'S FALLS MEMBERS MAY REGISTER FOR FEBRUARY AND APRIL VACATION CAMPS AT THE UNION ST. CLUBHOUSE.

\*THE UNION ST. CLUBHOUSE IS OPEN DURING FEBRUARY AND APRIL SCHOOL VACATION WEEKS, 7AM - 6PM, FOR \$150.

\*\*THE CLUB WILL BE OPEN UNTIL 8PM FOR TWEENS & TEENS BEGINNING MONDAY, SEPTEMBER 30 - FRIDAY, APRIL 25.

**Boys & Girls Club of Manchester**  
**BEHAVIORAL CONSEQUENCE GUIDELINES**

The Boys & Girls Club of Manchester’s foremost responsibility to our members and staff is to ensure that they are safe and always treated with respect. Behavioral Guidelines are clearly outlined and posted at the Union Street Clubhouse and all sites. The following are general guidelines by which all Site/Group Directors should attempt to administer fair and equitable consequences with respect to misbehavior by a member. All Site/Group Directors will attempt to evaluate each instance of member misbehavior on a case-by-case basis and apply the appropriate consequence. Member redirection and counseling will be utilized with respect to minor misbehaviors. All members and their parents/guardians have the option of appealing a behavioral consequence.

Site Directors and the Program Directors are responsible for the training of subordinate staff regarding redirecting and educating Club members with respect to misbehaviors they witness under their supervision. Subordinate staff will be trained with respect to the appropriate use of Behavioral Write-Up Forms. Group/Site Directors will be responsible for tracking member behavior yearly. The Club’s goal is to work with all members towards consistently displaying positive behaviors and to retain all members within the Club programs.

<b>Inappropriate Member Behavior</b>	<b>Consequences</b>
<i>Repeated minor misbehaviors/disrespect</i> 1 <sup>st</sup> Instance: 2 <sup>nd</sup> Instance: 3 <sup>rd</sup> Instance:	1-3 Program Day Suspension 3-5 Program Day Suspension Suspension/Conduct Committee Consideration*
<i>Physical actions, threats, or extreme verbal abuse towards another member</i> 1 <sup>st</sup> Instance: 2 <sup>nd</sup> Instance: 3 <sup>rd</sup> Instance:	1-3 Program Day Suspension 3-5 Program Day Suspension Conduct Committee Meeting*
<i>Physical actions or threats or extreme verbal abuse to staff member</i> 1 <sup>st</sup> Instance: 2 <sup>nd</sup> Instance:	1-3 Program Day Suspension Conduct Committee*
<i>Damage to Club or another member’s property</i>	1-5 Program Day Suspension & Restitution
<i>Stealing from the Club, members, or staff etc...</i>	1-5 Program Day Suspension & Restitution
<i>Misuse/inappropriate use of cell phone</i>	1-5 Program Day Suspension/Conduct Committee*
<i>Under the influence of any illegal substances in Club program</i>	Indefinite suspension/Conduct Committee*
<i>Sexual abuse or sexual misconduct</i>	Suspension/Conduct Committee*

\*When a Conduct Committee meeting is required per behavior consequences, suspensions are indefinite until the meeting takes place. At which time suspensions may continue past meeting date if deemed necessary by the Conduct Committee.

**Conduct Committee:**

A meeting that takes place when a member has been suspended where it is determined whether the member can resume attending the Club. The meeting is with parents/guardians, the suspended member, and the Club’s Conduct Committee Team. At the meeting the members are given the opportunity to advocate for themselves and why they should be allowed to return to the Club after their suspension is carried out. At Conduct Committee meetings an outline of expectations will be presented to the member and the parent/guardian which must be agreed upon for that member to resume attending the Club. The failure to adhere to this behavioral plan will result in a full year suspension from the Club.



# MEMBERSHIP BEHAVIORAL AGREEMENTS

## **Respect**

I will respect myself, other members, staff, and their belongings.

## **Bullying**

I understand that bullying will not be tolerated.

## **BGCM Property**

I will respect Club property and clean up after myself.

## **Club Rules**

Club rules apply even when I am away from Club grounds on field trips or Club sponsored activities.

## **Language**

I will use appropriate language and strive to always be a positive role model.

## **Attendance**

I will only come to the Club on school days if I have attended school that day.

## **Substance Use**

I will be substance-free when I attend the Club or participate in Club Sponsored activities.

## **Electronics**

Only tweens & teens may use personal electronic devices in their home bases.

## **Participation**

I will participate in Club programs and understand that hallways and bathrooms are not program areas.

## **Dress Code**

I will always dress appropriately, avoiding spaghetti strap tops, exposed midriffs, exposed underwear, and wearing hoods on my head. I must wear sneakers when participating in gym activities.

## **Physical Contact**

Physical contact that could potentially harm another member or staff member is strictly prohibited. However, I understand that hugs and high fives are acceptable if mutually agreed upon by both parties.

## **Zero Tolerance For Weapons Of Any Kind**

We have a zero-tolerance policy regarding the possession of firearms and/or items deemed as weapons, which could endanger myself, other members, and staff. Possessing these items will result in immediate expulsion.

***By registering member, I have read and accepted the BGCM Membership Behavioral Agreements. Membership privileges may be suspended if the behavioral contract is not followed.***