



**United Way of Tri-County
TOWN OF MILFORD, MASSACHUSETTS
MILFORD YOUTH CENTER**

24 Pearl St., Milford, MA 01757 (508) 473-1756 Phone

Dear Parent/Guardian,

We would like to welcome you and your family to the Milford Youth Center. The Milford Youth Center has become the focal point for the children of Milford. It hosts many different activities and events throughout the year for the youth of Milford and/or the Milford Schools. The Milford Youth Center's after school program is open for youth ages 8-18, free of charge, from 2-6 pm Monday through Friday (check monthly calendar for any changes). All Youth members must be picked up by time of closing (unless they walk home). Pick up is outside of the building on 24 Pearl St. There may be additional permission forms to participate, due to some programs being held off site (Transportation is not provided). The game room and gymnasium will be offered daily. All participants must fill out a registration form annually to be a member. Once this form is returned to the Center, the member will be provided with a key tag and ID number. This will be how the Youth Center staff will track attendance. Therefore, all members are required to bring in their key tag in order to enter the facility. If key tag is lost, the Center will charge \$1.00 for replacement.

MYC Code of Conduct:

The Milford Youth Center Code of Conduct prohibits the following activities:

- Possession and/or use of alcoholic beverages, tobacco and illegal substances
- Sexual misconduct and/or harassment
- Possession of weapons or firearms
- Use of foul language or profanity (including on clothing/belongings)
- Behavior that violates state, local laws, school or facility rules and regulations

The Milford Youth Center Code of Conduct requires and considers mandatory the following activities:

- Observance of all facility rules and regulations
- Completed and signed conduct and medical forms
- Signing in and out of the center with MYC key tag or ID number
- Reporting of conduct violations by all participants, and Whereas, the Milford Youth Center Code of Conduct requires that all members respect the property and personal boundaries (ex. No bullying of either a physical or verbal nature) of others and the staff members in which any Milford Youth Center sponsored activity is held.

For more details on our Code of Conduct, please visit our website at www.milfordyouthcenter.net

Discipline

If these rules are broken the Milford Youth Center adheres to the three strike policy.

- **First offense:** MYC member is expelled from the Center for one day and parent/guardian is notified.
- **Second offense:** MYC member is expelled for one week. Parent/guardian is notified and must meet with Youth Center staff before being accepted back into the Center.
- **Third offense:** MYC member is expelled indefinitely or time is set at the discretion of Youth Center staff. Parent/guardian is notified and must meet with Youth Center staff if he/she will be allowed back into the Center.

Please keep this page for your reference.

Please fill out registration form (page 2-3) completely and return to MYC.

This must be returned before attending program.

Milford Youth Center Membership Form: Valid from August 30, 2017 to June 30, 2018

Participant's Name _____ Gender: _____

Race (please select all that apply):

- | | |
|--|---|
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Hispanic or Latino |
| <input type="checkbox"/> Asian | <input type="checkbox"/> White or Caucasian |
| <input type="checkbox"/> Black or African-American | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | |

Primary Language Spoken: _____ Secondary Language (s): _____

Birth date: ____/____/____ Age: _____ Grade _____ School _____

Is your child part of the free lunch program at school (please circle): Yes / No
Is your child part of the reduced lunch program at school (please circle): Yes / No

Address: _____

City: _____ State: _____ Zip: _____

Parent/Guardian's Name _____

Phone #'s - (H) _____ (W) _____ (Cell) _____

Email: _____

Emergency Contact name: _____ Phone #: _____

Liability Release:

I, _____ parent/guardian of _____, in consideration of being allowed to participate in the Summer Camp, for 2017 sponsored by the Milford Youth Center and approved by the Milford Youth Commission, agree to the following conditions: The program organizer(s), group chaperones the Milford Youth Commission, the town of Milford and their respective employees and agents shall not be liable for any personal injury (including death), damages, or loss to my person or property arising from my participation in this program (including offsite programming). It is further agreed that in consideration of being so permitted to participate, (I)(we) do forever release, acquit, discharge and covenant to hold harmless the Milford Youth Commission and the Town of Milford, and their successors, departments, officers, employees, servants, and agents, of and from any and all actions, causes of action, claims, demands, damages, costs, loss of services, expenses and compensation on account of, or in any way growing out of, directly or indirectly all known and unknown personal injury or property damage which may hereafter occur, and also any claims or rights of actions for damages which have or hereafter may acquire, resulting from participation in the subject excursion.

Parent Signature: _____

Date: _____

Medical Release

Knowing that the physical condition of my child is satisfactory to participate at the Milford Youth Center and activities, I hereby give permission for him/her to participate. I further accept responsibility for my child in case of injury. I hereby release the Milford Youth Center and its Employees, the towns and their agents, and such other officers and/or volunteers from any liability that may occur to my child, as a result of an accident. I/We the parent(s)/guardian(s) of _____ hereby give my/our approval to his/her participation in any and all Milford Youth Center activities during the current After School program. I/We assume all risks and hazards incidental to such participation, including transportation to and from the activities; and I/We do hereby waive, release, absolve, indemnify and agree to hold harmless the Milford Youth Center, the town of Milford, the organizers, supervisors, sponsors, participants, and persons transporting my/our child to or from activities, for any claim arising out of an injury to my/our child to the extent covered by accident or liability insurance. On rare occasions, an emergency requiring hospitalization and/or surgery develops. As a general rule, anesthesia may not be administered to or operations performed upon a minor without written permission by his/her parent/guardian. Therefore, in order to prevent a dangerous delay, if an emergency does occur and we are unable to contact the parent or legal guardian, the parent/guardian is asked to sign the release form below. In the event of injury or illness to me/my son/daughter _____, born on, _____, I hereby authorize Milford Youth Center representative(s) to secure whatever treatment is deemed necessary and, if recommended by an attending physician, the administration of an anesthetic or surgery. We do hereby release and discharge the Milford Youth Center, officers, employees, and agents, from any and all actions or claims for damages suffered by me/us or my/our child, as a result of the permission for any medical care for my/our child during his/her participation in any Milford Youth Center activity, event or trip.

Please list any known allergies (food, drugs, insect stings or bites, etc.) and/or any special medical and/or behavioral concerns or conditions that we should be aware of? Please provide any documentation that maybe helpful to us (we are not directly affiliated with Milford Public Schools so we have no access to this information)

Parent/Guardian Signature _____ **Date** _____

Photo Release

I understand that my child’s name and photo may be used in photographs, videos, literature, web pages, and news releases in local papers and other media outlets. I, _____ give permission of my son/daughter _____ to be photographed and named for After School activities for the Milford Youth Center.

Parent/Guardian Signature _____ **Date** _____

Below is for staff use only

Any additional paperwork needed for medical and or behavioral: _____

CORI needed (18 yrs. Old – need form and ID): _____

MYC Key TAG #: _____

Photo for MySeniorCenter: _____

Registration complete: _____ Staff member: _____ File: _____