



# 2019 MEMBERSHIP FORM

The Quinte West Youth Centre is operated by the Committee for Innovative Thinking for Youth (C.I.T.Y.) in cooperation with several community groups and agencies partnering to deliver programs and services to youth ages 10-18 in Quinte West and surrounding area.

**Membership is requested as a “safety step” to ensure appropriate communication with parents should there be an emergency.**

Parents of youth between the ages of 10 - 12 must initial the “special parent consent” acknowledging their child does not require direct supervision and child care. The information collected here is to be used for program design and emergency information.

Name of Youth: \_\_\_\_\_ Age: \_\_\_\_\_

Date of Birth: Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_ Current Grade: \_\_\_\_ Current School: \_\_\_\_\_

Youth Home Address: \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

**Emergency #1 Contact:**

Name: \_\_\_\_\_ Relation to Youth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone \_\_\_\_\_ business or cell

**Emergency #2 Contact:**

Name: \_\_\_\_\_ Relation to Youth: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone \_\_\_\_\_ business or cell

Would you like to be added to centre email list? Y / N please enter email address to receive info \_\_\_\_\_

**ATTENTION:**

**AS A PUBLIC SHARED FACILITY, WE ARE NOT ABLE TO PROVIDE A NUT FREE/ALLERGY FREE FACILITY**

Are there any allergies, medical concerns, or other information you would like to share?

**GENERAL ACTIVITY PERMISSION**

I am the legal guardian to \_\_\_\_\_ (name of youth). I give permission for \_\_\_\_\_ (name of youth) to participate in supervised activities offered at the Quinte West Youth Centre. I understand that the Quinte West Youth Centre staff and volunteers will enforce the stated Boundaries (listed below).

**The Quinte West Youth Centre, their staff, or their volunteers DO NOT provide child care. The staff and volunteers at Quinte West Youth Centre are not responsible for your youth’s arrival or departure from the Centre.**

The Quinte West Youth Centre is a drop-in program with scheduled activities, skill development and access to community resources and as such, youth come and go freely from the Centre just as they would from a local store, arena or community centre.

**Guardian Signature** \_\_\_\_\_

**AGES 10 - 12 - SPECIAL CONSENT - PLEASE INITIAL ALL**

I understand that the Quinte West Youth Centre will not provide child care for my youth. \_\_\_\_\_ (initial)

I understand that youth age 10 - 12 will be attending the Centre with youth ages 10 - 18. \_\_\_\_\_ (initial)

I am responsible for transportation of my youth to attend and depart from the Quinte West Youth Centre. \_\_\_\_\_ (initial)

I understand that ALL youth ages 10 - 18 are unsupervised during arrival or departure from the Centre. \_\_\_\_\_(initial)

**MEDIA CONSENT**

I hereby authorize any images/video/recordings taken of my teen to be used for media purposes including both traditional and digital or social promotional presentations and marketing campaigns. I also authorize use by the Quinte West Youth Centre of any media material created by my youth within and outside the Quinte West Youth Centre. I understand that my teen may be involved in activities that will be covered by news media and that they may be photographed and named in such events with their consent.

\_\_\_\_\_  
Guardian Signature

\_\_\_\_\_  
Date

**CODE OF CONDUCT**

We have created specific policies and procedures for *your safety* and the *safety of others*. These have been outlined in the code of conduct on this form. They are also noted on your membership card and posted throughout the centre. Please sign and date this form to acknowledge that you have had the opportunity to review these boundaries with a staff member and that you agree to follow them while at the Quinte West Youth Centre.

**Boundaries**

This program is built on respect.  
Respect other people’s opinions.  
Respect other people’s property.  
Respect everyone and each other with your ACTIONS AND  
LANGUAGE.  
Respect the property and equipment.

No Hands On, including but not limited to, sitting on one another,  
hugging, touching, poking, etc.  
No Alcohol, No Discrimination.  
No Smoking Inside. No Drugs.  
No Weapons, No Violence.  
Treat others as you would like to be treated

If you choose not to follow the boundaries, you will be directed to leave the City of Quinte West property.

\_\_\_\_\_  
**Guardian Signature**

\_\_\_\_\_  
**Youth Signature**

\_\_\_\_\_  
**Staff Signature**

\_\_\_\_\_  
**Date**

\*Note: Failure to agree to this code of conduct will restrict membership.

**Membership Fee - \$5.00 for the year**

There is a yearly membership fee in order for youth to attend Quinte West Youth Centre. \*A Payment Plan or volunteering can be arranged between youth and Program Coordinator to cover membership. Volunteer option is not guaranteed and will be accepted only a case by case basis.

Payment options (Please initial beside payment plan of choice)

- \_\_\_\_\_ Pay in full
- \_\_\_\_\_ Payment Plan\*
- \_\_\_\_\_ Volunteer at Quinte West Youth Centre\*

If you have any questions, comments, or concerns about the Quinte West Youth Centre, please do not hesitate to contact us by phone at (613) 392-6946 or by email at [quintewestyouth@gmail.com](mailto:quintewestyouth@gmail.com) or visit us at 2 Wooler Road, Trenton.

**\*GUARDIANS - PLEASE ADVISE THE QUINTE WEST YOUTH CENTRE STAFF IF THERE ARE ANY CHANGES TO THE INFORMATION YOU HAVE PROVIDED ON THIS FORM**