

Welcome to the Boys & Girls Club of Watertown, South Dakota!

We are located at 1000 3rd Ave NE, Watertown, South Dakota. Telephone Number: (605) 886-6666.



GREAT FUTURES START **HERE.**



BOYS & GIRLS CLUB
OF WATERTOWN

The Boys & Girls Club Main Club Site Program is open to children in grades 1 – 12. Once children have completed Kindergarten, they are then eligible to join the Club.

To Join the Club: A membership form and a [food service form](#) must be completed. The membership form is submitted to us online once you pay online. The food service form must be handed into the Club or emailed to clubinfo@bgcofwatertown.com (one food service form per family).

Membership Fees:

1. **Year Round**, May 27, 2025 – May 25, 2026: \$125
2. **Summer Only**, May 27, 2025 – August 8, 2025: \$100
3. **School Year**, August 21, 2025 – May 25, 2026: \$50

****Membership fees are non-transferrable and non-refundable****

Payment Options: Credit/debit card payments are to be made online, a 4% convenience fee is added to transaction. If for some reason you are not able to pay with a credit/debit card, you must stop into the Boys & Girls Club to pay with cash or check.

Brand NEW members along with a parent/guardian are required to attend an in-person orientation before attending the Club. These are held twice a month on Wednesdays at 5:30 pm, pre-registration is **NEEDED**. See the new member orientation dates here to sign up. <https://bgcofwatertown.com/youth-special-programs-calendar/>

Hours:

School Year: (we follow the Watertown School District calendar schedule)

- Monday-Friday 3:30 - 6:30 pm for Grade 1-12
- Watertown School Teacher In-service Early Dismissal Days 12:30 - 6:30 pm for Grade 1-12
- Watertown No School Days 7:30am - 6:00pm for Grade 1-12

Summer Days:

- Monday – Friday 7:30 am – 6:00 pm for Grade 1-12

A Year at a Glance calendar is posted on our website, <https://bgcofwatertown.com/bgc-year-at-a-glance-3/>

Grade 1-12 Club Main Site Membership Enrollment

Office Use Only

- ☐ Year Round, May 2025 – May 2026: \$125
- ☐ Summer Only, May 2025 – August 2025: \$100
- ☐ School Year, August 2025 – May 2026: \$50

Membership #:	New or Renewal	Payment Type: Cash _____ Check # _____ CC _____
Orientation Date (Month, Day, Year)	Payment Date: _____ Taken By (Staff Initial): _____	
Trax8 Processed Date: _____ (Staff Initial) _____	Food Service Form (Staff Initial): _____	
Card Printed Date: _____ (Staff Initial) _____	-Staff Fill Out This Gray Section-	

Member (Child's) Information:

Child's Full First Name: _____ Middle Initial: _____ Last Name: _____

Child's Nickname-if applicable: _____ Date of Birth: ____-____-____

Gender (Please Check): ☐ Female ☐ Male ☐ Non-Binary ☐ Other ☐ Prefer Not to Answer

Race/Ethnicity (Please Check): ☐ African American ☐ Asian ☐ White ☐ Hispanic ☐ Native American
☐ Multi-Racial ☐ Native Hawaiian/Other Pacific Islander ☐ Other _____

Child's Household Address:

Street or PO Box _____ City _____ State _____ Zip Code _____

School Information:

Child's Grade Level 1-12 _____ Child's School Name: _____

Medical Information:

Child's Counselor Name and Phone # -if applicable: _____
(See Release of Information under our Permission & Release section)

Please indicate any medical needs, mental health diagnosis and/or allergies:

Please indicate any medication presently taking: (See Medication Policy bottom of page 3) _____

Please list any additional concerns or comments: _____

Member Household Information:

Member Lives With (Please Check): Mom and Dad _____ Mom only _____ Dad only _____ Mom/Step Parent _____
Dad/Step Parent _____ Foster Care _____ Grandparent _____ Grandparents _____ Guardian(s) _____ Other _____

Number of Family Members in the Household: _____ Parent Active in Military Yes _____ No _____

Annual Household Income: \$ _____ (all confidential)

Household / Guardian E-mail Address: _____

Head of Household Adult / Guardian Information: (This is the Primary Contact) *list who member lives with*

Head of Household / Guardian 1st and Last Name: _____

Relationship to Club Member Child: _____

Primary Phone # for contact _____

Place of Employment: _____ Work Phone # for contact *if applicable* _____

Additional Adult / Guardian Information that also lives in same household: if applicable

Other Household Adult / Guardian 1st and Last Name: _____

Relationship to Club Member Child: _____

Primary Phone # for contact _____

Place of Employment: _____ Work Phone # for contact *if applicable* _____

****Note:** It is legal for either parent to pick up their child unless we have a copy of a court order restricting visitation.

Is either parent legally restricted from visitation with your child?

No _____ Yes _____ (If yes, please attach copy of court order)

Emergency Contact Information:

List TWO other people to contact in an emergency in case if the Head of Household or other Adult Household aren't able to be reached. These people MUST live in the Watertown area. If an emergency situation were to arise, and we are unable to reach you or your emergency contacts, Law Enforcement may be contacted to assume responsibility for your child. This section may include the other parent that the child member does not live with primarily.

1. Name _____

Relationship to Member _____

Primary Phone # for Contact _____

2nd Phone # for Contact *if applicable* _____

2. Name _____

Relationship to Member _____

Primary Phone # for Contact _____

2nd Phone # for Contact *if applicable* _____

Parental/Guardian Consent

Publicity/Media Release

The Boys & Girls Club of Watertown has my permission to my child's photograph or video footage publicly to promote activities and programs of the Boys & Girls Club. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

_____ **Yes**

_____ **No**

Travel

I give permission for my child to leave the Club in a Boys & Girls van/public school bus for local field trips/activities. I understand that I will be notified for all out of town trips via permission slip.

_____ **Yes**

_____ **No**

Permission & Release

Policies and Waivers

I agree to adhere to all Boys & Girls Club policies and waivers, **which can be found online at bgcofwatertown.com, or at the reception desk upon request.** Such policies include, but are not limited to, Member Guidance, Property Damage, Bullying, Medication, Technology Usage, etc.

Lost/Stolen Items

I understand the Boys & Girls Club is not responsible for lost or stolen items. Please ask staff to check the lost and found closet if items are missing.

Data Collection

I give my permission to the Boys & Girls Club of Watertown to collect information via online or written surveys (i.e. BGCA National Youth Outcomes Initiative survey), questionnaires, and focus groups from the minor child listed on this application. Any and all information received will be kept strictly confidential. Data gathered through these means will be summarized in the aggregate and will exclude all references to any individual responses. The aggregated results of these analyses may be shared with Club staff, Boys & Girls Clubs of America (BGCA), funders, and other community stakeholders to evidence program effectiveness and/or Club impact on our members.

Release of Information

I give my permission to the Boys & Girls Club of Watertown, Watertown School District, surrounding school districts, mental health professionals, and other community agencies to exchange information regarding the minor child listed on this application. The purpose of the exchange is to help both organizations do a better job of helping the student be successful in school, in the Boys & Girls Club and in life.

Mentor Program Permission

I give my permission for my child to participate in the Mentoring Program at the Boys & Girls Club. I fully understand that the program involves mentors, who shall be selected from the community and will be screened (including a criminal background check) and trained before beginning in the program. A mentor will be expected to spend a minimum of one hour per week with my child on-site at the Boys & Girls Club. The mentor is not allowed to take or meet my child beyond the Club facility.

I understand that my child will participate in an orientation session at the Club in which the program will be explained. The program is planned to last one year and continuation may then be discussed. I understand that during the course of the mentoring program there may be special group events (incorporating all mentors and youth) and family events planned. I understand that the staff of the Club will provide ongoing monitoring of the mentoring activities.

I give the Boys & Girls Club Mentoring Program Coordinator permission to obtain my child's academic and attendance records from my child's school. I permit the Mentoring Program staff and the Boys & Girls Club to utilize photographs of my child taken during his/her involvement in the mentoring program and waive all rights of compensation.

Safety

I accept responsibility in the unlikely event that an accident might take place, and hereby acknowledge that I am solely responsible for the cost of health care for my child, even as a result of my child's participation in Club programs or activities.

I, the parent/guardian of the minor child listed on this application, for ourselves, our heirs, executors and administrators, hereby release, waive, acquit and forever discharge the Boys & Girls Club of Watertown, Board of Directors, and Boys & Girls Clubs 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 causes 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.

Authorization for Medical Care

In case of serious accident/injury, I hereby authorize the staff of the Boys & Girls Club of Watertown and those individuals named on the above Membership/Emergency form to give any necessary treatment to my child. You may call the doctor and/or ambulance if necessary at my exclusive expense. I agree that I am solely responsible for updating medical information to the Boys & Girls Club of Watertown.

Medication Policy

For the safety of all youth, the Boys & Girls Club of Watertown urges parents to schedule any necessary medication that needs to be taken prior to attending the Club or after Club hours. If medication must be administered during Club hours, it must be done so by a parent or guardian.

- Boys & Girls Club Staff will not administer medication, nor can it be stored at the Club facility.
- Youth may not bring, nor store medication in their personal belongings (pockets, bookbags, etc.)
- If your child is in need of medication in the event of an emergency, i.e.: bee sting or other allergic reaction, please bring this to our attention upon registering your child.

Nondiscrimination Statement Link: <https://bgcofwatertown.com/wp-content/uploads/2021/09/USDA-Nondiscrimination-Statement.pdf>

A food service form (one food service form per family) must be completed for a child to be able to attend the Club. The food service form may be handed into the Club staff or emailed to clubinfo@bgcofwatertown.com

This form helps us with our funding for our food service program with no cost to families.

Even if you feel you do not qualify for Free or Reduced meals, please then fill in N/A in the income section (step 3), then fill out the whole contact information section (step 4) with a signature too and fill in section (Step 1) with all kiddo information that live within your household.

<https://bgcofwatertown.com/wp-content/uploads/2024/08/2024-Food-Service-Form.pdf>

at least one Household Adult /Guardian must sign and date this enrollment form

Signature of Head of Household Adult / Guardian _____ Date _____

Signature of Other Household Adult / Guardian _____ Date _____

Always feel free to view our website at bgcofwatertown.com under the Main Club Site tab for the [BGC Year at a Glance \(calendar\)](#) and for any upcoming field trip options [Youth Special Programs Calendar](#).

During the School Year (after school)- bussing to the Club right from the school

Transportation: Parents and Club members are responsible for their own transportation to and from the Club.

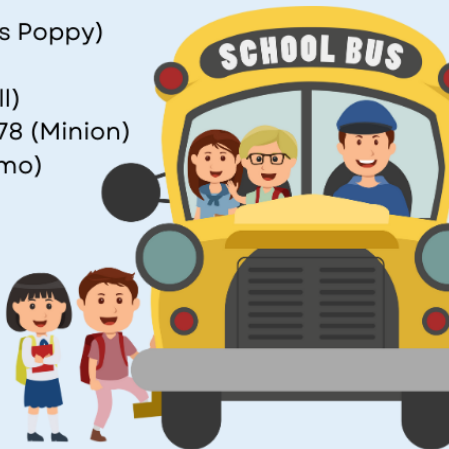
All Club members are required to use the new door-to-door after-school bus service provided by the Watertown School District.

BUS ROUTES TO THE CLUB:

- Jefferson Elementary – Bus #85 (Princess Poppy)
- Lincoln Elementary – Bus #84 (Sven)
- Mellette Elementary – Bus #75 (Tinkerbell)
- Watertown Intermediate School – Bus #78 (Minion)
- Watertown Middle School – Bus #73 (Nemo)



**BOYS & GIRLS CLUB
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For further questions, please call the WSD Transportation Center at 605-882-6335.
The transportation schedule is available at: <http://5il.co/2tafs>

Text to Pick Up: Please pull up to the Club Main entrance to pick up your child. Simply sign up for the **BGC Remind Group** and text us your child's name when you arrive.

You are always welcome to come inside the Club and Staff at the front desk area can then page for your child.

BGC REMIND

Sign up with your child/children group remind to stay in the know about Club programs, and to text us when here for pick up.

Grade Class Code

1st	@bgcw1st
2nd	@bgcw2nd
3rd	@bgcw3rd
4th	@bgcw4th
5th	@bgcw5th
6th	@bgcw6th
7th-12th	@bgcwteens

- 1) Text (class code) to 81010
- 2) Save response number as "BGC Remind"
- 3) Text your child's name when you arrive
- 4) Receive confirmation from Club Staff
- 5) Use the saved "BGC Remind" number to text daily and get important updates

Please text your child's name only once you have arrived in the BGC parking lot. Calling the Club at 886-6666 is still an option too.



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