

# Augusta Teen Center (ATC) Member Handbook 2023-2024

The Augusta Teen Center (ATC) exists to serve the teenagers of the Augusta area. We provide caring adults and a safe place where they can learn marketable skills, healthy living habits, and have opportunities to give back to the community. In order to achieve this vision, we rely on both teen and parental support to help in creating a safe club environment for all our members. The programs at the Boys & Girls Club Augusta Teen Center are available to any youth grades 7th through 12th, from anywhere in Maine. Thanks to our wonderful community sponsors, state and federal funding and many amazing grants we participate in all our programs at the Augusta Teen Center are offered to our members for **NO COST** to the member or their family.

The following is a handbook created for parents and teens to understand the expectations of the Augusta Teen Center and its members.

#### MAKE SURE TO LIKE US ON FACEBOOK FOR THE MOST CURRENT UPDATES!!

### **Primary Staff Members:**

Christopher Maloney Executive Director
Ashley Healey Assistant Director
Elizabeth Schneider Program Coordinator

#### **Contact Information:**

Address: Boys & Girls Club of Augusta 244 Water Street . Augusta, ME 04330

Phone: 207-622-0452

Email: info@augustateencenter.org

Website: BGCAM.org

Facebook: fb.me/BGCAMaine

#### **Hours of Operation:**

Summer Program: Monday through Friday 10am-4pm

School Year: Monday through Friday 7am-5pm

Roads to Success & Restorative Programs: 7am-1pm

After School Program: 2pm-5pm

\*Like us on Facebook for storm & Holiday Closings Weekly program activities and daily updates will be provided on Facebook (<a href="https://www.facebook.com/BGCAMaine/">https://www.facebook.com/BGCAMaine/</a>) or by calling the club at 622-0452.

Please review this packet with your teen, complete all necessary forms, and return the packet with your teen the next time they visit the Augusta Teen Center.



# **Student Enrollment Form**

### **Student Information:**

| Full Name:   | Full Name: Preferred/NickName:   |   |                  |                                       |
|--|--|---|------------------|---------------------------------------|
| DOB:   | Age:   | Gender:   | Pronouns:        | <del></del>                           |
| School:  |  | Grade:  |                  |                                       |
| Home Address:  |  |   | City:Zip: _      |                                       |
| Teen's Email:  |  | Teen Phone #:   |                  |                                       |
| Sizes - Shirt:   | Pants:   | Shoes:  | 1st Year @BGCAM: |                                       |
| Names of Sibling   | gs/Age:  |   |                  |                                       |
| ent/Guardian II<br>arent/Guardian In   |  |   |                  |                                       |
| Name:  |  | Relation:   | Home #:          |                                       |
| Email:   |  | Cell#:  | Work#:           |                                       |
| Address if differen  | ent from above:  |   |                  |                                       |
| arent/Guardian In  | formation #2   |   |                  |                                       |
| Name:  |  | Relation:   | Home #:          | · · · · · · · · · · · · · · · · · · · |
| Email:   |  | Cell#:  | Work#:           |                                       |
| Address if differen  | ent from above:  |   |                  | · · · · · · · · · · · · · · · · · · · |
| <ul> <li>Race: (Circ<br/>Native Haw</li> <li>Has a mem</li> <li>Active: (Cir</li> <li>Eligible for</li> <li>TANF? (Cir</li> <li>Are there M</li> </ul> | Circle One) Hispar<br>cle One) White B<br>vaiian/Pacific Islan<br>ber of your family<br>cle One) YES N<br>free or reduced lu<br>cle One) YES NO<br>Medical or physical | nic/Latino/Spanish origin or Nack Asian American Incider Other: served in the military?(Circle O Relation and Branch: nch?(Circle One) NO FREE concerns that may limit part | REDUCED          |                                       |



# **Health History & Emergency Contact Form**

| Members Full Legal Na   | ıme:                               |                  | Date of Birth:  |
|---|------------------------------------|------------------|---|
| HEALTH CONDITIONS   | : past or present please ch        | eck all that a   | pply  |
| ☐ Arthritis   | ☐ Fainting/Dizzy Spells            | ☐ Musculo        | oskeletal Disorders   |
| ☐ Asthma  | ☐ Headaches/Migraines              | ☐ Mental/        | Psychological Disorder  |
| ☐ Hearing Impairment  | ☐ Eyesight Impairment              | ☐ Speech         | Impairment  |
| $\square$ Bleeding Disorder   | ☐ Heart Defects/Disease            | ☐ Convuls        | sions/Epilepsy/Seizures   |
| ☐ Hernia  | ☐ Diabetes                         | ☐ Hyperte        | ension/High Blood Pressure  |
| ☐ Kidney/Bladder Illness  | ☐ Eating Disorders (Anorexi        | ia, Bulimia, etc | :.)   |
| ☐ Dietary Restrictions:   |                                    | Other:           |   |
| Please explain in any items   | checked above:                     |                  |   |
|   |                                    |                  |   |
| List of current daily medica  | tions:                             |                  |   |
| ,,  |                                    |                  |   |
| KNOWN ALLERGIES: P  | lease list any allergy includi     | na severity/t    | reatment/date of last reaction  |
|   | iouoo iioc airiy airo. gy irroidar |                  |   |
|   |                                    |                  |   |
|   |                                    |                  |   |
| Does a member suffer from Carries an inhaler? $\square$ Yes $\square$ |                                    |                  | ·   |
|   | ·                                  | ·                | -   |
|   |                                    |                  | nors: My child has permission to take<br>is while at the Augusta Teen Center. |
| ☐ Tylenol / Acetaminophen   | ☐ Ibuprofen (pain/s                | swelling)        | ☐ Pepto Bismol  |
| ☐ Sudafed / Decongestant  | ☐ Tums / Antacid                   |                  | ☐ Cough Medicine  |
| ☐ Benadryl / Antihistamine  | ☐ Skin or Anti Itch                | Ointments        | ☐ Sunscreen   |
| ☐ Other:  |                                    |                  |   |
| EMERGENCY CONTACT   | in the event we are unabl          | e to reach Pa    | rents/Guardians   |
| Emergency Contacts Nan  | ne:                                |                  |   |
| Phone #   |                                    | _ Relationsh     | nip:  |
| <b>SIGNATURE:</b> As Parents/report any change to the he              |                                    |                  | complete and accurate and I will enter as soon as possible.                   |
| Signature of Parent/Guard   | lian:                              |                  | Date:   |
| Signature of Faronic Oddic  |                                    |                  |   |



### **MEMBERS AGREEMENT**

Once you and your teen have read the policies detailed in the Augusta Teen Center Policies on our website please complete below and sign with your teen to confirm your understanding of the expectation of all our members at the Augusta Teen Center. Please return this form along with the student enrollment form, health history form, small trip permissions form, and parent consent form. If your teen is prescribed medication that will need to be administered during center hour we will need to schedule a time to discuss our medication policy.

-Thank you, The Augusta Teen Center

| collabora I agree to purposes Transpor I give the transport Onsite p Off-site a for any ac Give considered | mission for student data to be shared ators, such as JMG, MaineGeneral Co allow the ATC to use photographs of and news media during ATC activities retation home by KVCAP, program startation to supervised activities by program startation to supervised activities by program activities (includes mentoring activities/field trips (Note: A separate civity that involves a significant level of sent for my child to leave the ATC un | r video which may include: promotion, at the ATC and at other project locate ff or authorized volunteers when necessary staff or authorized volunteers. It emergency medical treatment and regency Room if necessary.  The provision form will be required for safety risk.  Supervised: |
|--|--|--|
|  |  |  |
| es, and permissions on<br>Iduct Policy, Member   | by acknowledge you have read, under<br>f the Augusta Teen Center. The Polic<br>Expectations, Dress Code Policy, Coment, Small Group Trips Permission   | ces include the following: Member<br>OVID-19 Policy, Member Technolog  |
| es, and permissions of<br>iduct Policy, Member<br>, Transportation State                                   | f the Augusta Teen Center. The Police<br>Expectations, Dress Code Policy, Co   | ces include the following: Member OVID-19 Policy, Member Technologns, and Parent Consent forms.  |
| es, and permissions of duct Policy, Member Transportation State  Parent Signature  Member Signature        | f the Augusta Teen Center. The Police<br>Expectations, Dress Code Policy, Co   | ces include the following: Member OVID-19 Policy, Member Technolog ns, and Parent Consent forms.  Date  Date   |



# Small Group Field Trip Permission Form

| l parent/guardian   | , give my permission for  |
|---|---|
|   | , to participate in small group field trips this summer.  |
| These trips may consist of:                                       |   |
| in Maine this summer. Som<br>beaches, and Vaughan Wo              | staff going in the ATC van to explore some fun places ne places we might visit are: State parks, nature trails, rods. Teens may go exploring downtown Portland, note teens choose a group more information will be and locations of these trips.) |
| The group trips will depart to                                    | from the teen center at 9am and return by 4pm.  |
| <ul> <li>Food and snacks will be prespending money.</li> </ul>    | ovided, although teens will need to bring their own   |
| and most of all, during th  | need to be on best behavior leading up to the trip<br>e trip. The ATC Directors reserve the right to<br>he trip for behavior reasons.   |
| If you have any questions or conc and speak with Ashley or Chris. | erns please call the Boys and Girls Club at 622-0452  |
| Signed:   |   |
| Teen Member   | Date  |
| Parent/Guardian   | Date  |
| Please list any relevant health o                                 | concerns:   |
|   |   |
|   |   |



# **Parent/Guardian Consent Form**

| I, the parent or legal guardian of (teen name)<br>hereby give my permission for my child to participate in the<br>Girls Club and understand that this program will benefit and   |   |
|--|---|
| grow in areas they are interested in exploring.  |   |
| I fully understand that the program involves mentors, who se<br>community and will be screened (including a criminal backgood<br>beginning in the program. A mentor will spend a minimum of<br>on-site at the Boys & Girls Club. The mentor is not allowed<br>the Club facility. | ground check) and trained before of one hour per week with my child |
| I understand that my child will participate in an orientation s<br>program will be explained. The program will last one year a<br>discussed.   |   |
| I understand that during the course of the mentoring progra<br>events (incorporating all mentors and youth) and family even<br>staff of the Club will provide ongoing monitoring of the men  | ents planned. I understand that the                                 |
| I give the Boys & Girls Club Mentoring Program Coordinato academic and attendance records from my child's school.  | or permission to obtain my child's                                  |
| I permit the Mentoring Program staff and the Boys & Girls C<br>child taken during his/her involvement in the mentoring pro-<br>compensation.   |   |
| (Signature of Parent/Guardian)   | Date  |
| (Printed name of Parent/Guardian)  | Phone Number  |
| Thank you,<br>The Augusta Teen Center  |   |



## **Edge Program - Parent Permission Form**

**The Edge Program**: At the Augusta Teen Center, we have been working with numerous local businesses that typically hire first time job seekers. The common feedback that we hear is that teens do not have the basic skills needed for these jobs. Skills such as being to work on time, putting away their cellphones, and interpersonal skills are skills that many teens lack.

The Edge Program was created to help teenagers gain these valuable work skills along with workplace training, and practical workplace experience. This will help each teen explore different job and career options, while they learn the skills that will help them become successful in those first time jobs.

The Edge Program will include a food service track, a retail track, and other tracks designed around job interests. We will be seeking partner businesses to share their experience with teens to help them understand the realistic needs of these businesses. This will not only teach teens valuable skills, but also partner teens with local businesses to job shadow and get to learn hands on. Additionally, this will also provide a benefit for partner businesses, who will be connected with potential employees that will have a positive edge to be successful at their first job.

The Edge Program Activities: As a participant in the edge program teens will take part in many different activities. All of these activities will be supervised by an Augusta Teen Center adult mentor. Some of the activities that will include: business exploration walk of downtown Augusta Businesses, job shadows, trainings such as first aid/ CPR, Servsafe, OSHA, as well as field trips to different businesses to explore different work environments, career opportunities, and learn from a wide range of employees and business owners to help them navigate and plan for their future.

**Parent/Guardian Permission:** 

| I.                             | aive  | e permission to         |
|--------------------------------|---|-------------------------|
| (Full Nam                      | ne of Parent/Guardian)                      | , p =                   |
|                                | , date of birth:                            |                         |
| (Full Name of Teen Parti       | cipant)                                     |                         |
| to participate in the Augusta  | Teen Center's Edge Program Activities and   | d allow my teen to be a |
| part of any photos or videos   | taken during edge activities that may be si | hared with Edge program |
| sponsors or in program upda    | ites.                                       |                         |
| Signatures:                    |   |                         |
| Parent/Guardian's Signature: _ |   | _ Date:                 |
| Parent/Guardian's Phone:       | Email:                                      |                         |



### **Transportation Statement & Sign Up Form**

The Augusta Teen Center is limited in regards to our ability to transport teens. The ATC is, however, working to provide transportation for teens who need help getting to and from the Augusta Teen Center due to extenuating circumstances who live within a 3 mile radius of the teen center. While we know that transportation is a challenge for many people, unfortunately, we are limited in the number we are able to provide transportation for. If your teen will need transportation to and from ATC please fill out the following information for our review. We will only be able to provide transportation to members who by no other means would have transportation to ATC.

| Teens Name:   |                            | Teens Pl   | hone #: _   |         |        |  |
|---|----------------------------|------------|-------------|---------|--------|--|
| Pick Up/Drop Off Address:   |                            |            |             |         |        |  |
| Parents Name:   | Parents Phone#             |            |             |         |        |  |
| Needs Ride To ATC: (circle all needs)   | Monday                     | Tues.      | Wend.       | Thur.   | Friday |  |
| Needs Ride Home: (circle all needs)   | Monday                     | Tues.      | Wend.       | Thur.   | Friday |  |
| Please Explain Reasons for Transpor   | tation Ne                  | ed:        |             |         |        |  |
|   |                            |            |             |         |        |  |
| Behavior and following safety rules during that a member will forfeit their spot on the rides are a privilege, and safety is a majude on their best behavior or lose that pri | ne ride list<br>or concerr | if behavio | r is not re | medied. | These  |  |
| Teen Signature  |                            |            |             | )ate    |        |  |
| Parent Signature  |                            |            |             | Date    |        |  |

If you have any questions please email ATC at <a href="mailto:info@augustateencenter.org">info@augustateencenter.org</a> or call ATC at (207) 622-0452



# Member Code of Conduct Policy

We want to provide an environment that is free from conflict, distraction, or intimidation. he following conduct is prohibited:

- 1. Disregard of direction or command of authorized personnel.
- 2. Disruption and/or interference with the normal and orderly conduct of the ATC.
- 3. Physical abuse or assault of an ATC employee, member, or any individual.
- 4. Possession of a weapon or any object that can be considered dangerous.
- 5. Possessing, using, selling, or attempting to sell any illegal substances.
- 6. Destruction of, or attempting to destroy, ATC property or the property of another individual. (Repair or replacement cost will be charged to the parent).
- 7. Use of profanity, vulgar, or obscene language and gestures.
- 8. Bullying of any form either while on Club property or reported by other members as a result of cyber-bullying or other methods.
- 9. Extortion, coercion, blackmail, or forcing another member or person to act against their own will.
- 10. Engaging in verbal abuse such as name calling, ethnic, or racial slurs, or using derogatory statements to other members, personnel or other individuals.

### **Cost of Membership**

At this time, there is no membership fee for teens to participate in our programs. However, members are expected to help with Club clean-up and to participate in the food program. This helps to support the club.

#### **Cell Phones - Member cell phones will be limited to:**

- 1. Beginning of the day until the first member meeting.
- 2. End of the day after the last member meeting and all club clean-up is complete.
- 3. During staff-defined member breaks.
- 4. Parents can call the club phone or the club Directors to contact teens during non-break times.

#### **Member Suspension**

The Director may suspend any member whose conduct warrants it. The parent or legal guardian will be contacted immediately when that member is suspended and will have an opportunity to discuss the member's behavior.



# **Member Expectations**

Here at the Augusta Teen Center our members have developed the following list of member expectations that each member should follow while at the Teen Center:

- Respect Everyone!
- Respect the Teen Center Space, Supplies & Rules!
- Be A Positive Role Model & Lead By Example
- Think Before You Speak & Be Mindful of Other Peoples' Triggers
- Use Appropriate Language NO SWEARING!
- Cell Phones and Electronics Must Be Kept Away During Activities
- DO NOT Enter Staff Areas Unless You Ask
- Sign Up & Be Responsible For A Daily Job
- NO PDA (Public Display of Affection)
- Communicate Issues with Staff. NO Drama, Bickering or Arguing
- NO Sharing Hats/Clothing or Personal Items
- NO Blankets or Stuffed Animals at The Teen Center
- Participate in Afterschool Activities
- You Are Responsible For ALL Personal Belongings That You Bring Into Club (Phone, Electronics, Clothing, Etc.)
- Take Responsibility For Your Actions, You Control You!
- Clean Up After Yourself & Help Others Too!
- Help Us Provide A Safe Atmosphere For All Teens & Staff

To be a member at the Augusta Teen Center it is important you have read, understand and discuss any questions you may have about the expectations here at the Boys & Girl Club Augusta Teen Center. If you can not follow these expectations the Director may suspend any member. The parent or legal guardian will be contacted immediately when the member is suspended and will have an opportunity to discuss the member's behavior and discuss the requirements for reentry to the teen center programs.



# **Dress Code Policy**

Self-expression, especially through hair and clothing, is an important part of one's identity. However, in order to maintain a safe, comfortable environment for all members, the Augusta Teen Center does require that some rules apply to all members and staff regardless of age, gender, or any other factor.

#### The Augusta Teen Center requires:

- Shirts have straps or sleeves.
- The body should be covered so that underwear or areas normally covered by undergarments are not visible.
- See-Through or Mesh Clothing is not unless appropriate clothing is worn underneath.
- Clothing that endangers safety cannot be worn(ex: Spiked gloves/pants, cleats, etc.)

### Clothing Displaying Any of the following are deemed inappropriate

- Illegal Content
- Lewd or Sexual Content or Vulgar, discriminatory or obscene language or images
- Alcohol, Tobacco, Marijuana, or other drugs
- Weapons
- Statements, depictions or implications of hate speech/imagery targeting groups based on race, ethnicity, gender, sexual orientation, gender identity, religious affiliation, or any other protected classification

Keep in mind that the Teen Center is an active place. Please dress appropriately for activities and the weather. Clothing should not be a barrier to participation in activities.

The Teen Center Suggests:

- Wearing shorts underneath skirts/dresses for comfort and movement
- Wearing shoes comfortable for running over rough terrain
- Swimwear should follow the dress code. If no appropriate swimwear is available, a T-shirt and shorts can be worn or provided. Staff also suggest bringing dry clothing to change into after any swimming or water-based activities.
- In cold/rainy weather members should wear appropriate footwear (like boots), hats, and jackets. Bring gloves or mittens if possible

Teens who are found to be wearing inappropriate clothing will be asked to change. We encourage teens to come prepared for the day, dress for the weather, and be ready to move around! Repeated dress code infractions may result in a meeting with the ATC Directors to discuss the matter moving forward. We at the Augusta Teen Center want to ensure a safe, fun, comfortable environment for all attendees.



## **Member Technology Policy**

Access to the Internet, email and other technology is a privilege and carries responsibilities reflecting responsible and ethical use. The following guidelines apply to all member users, whenever they access any of the August Teen Center's technology and network connections.

- 1. The Clubs' technology and network has been established for educational purposes limited to classroom activities, school-to-career development, and scholastic research on appropriate subjects.
- 2. The Clubs' network has not been established as a public access service. Although there will be times where members can use the network for games, entertainment, etc., this use will be defined by the club staff. Members are expected to comply with this expectation.
- 3. Upon approval from ATC staff, non-ATC computers may be used for homework purposes.
- 4. All ATC and non-ATC computers used by members will be in open areas where the monitors are visible to staff at all times.
- 5. All games, movies, and music used in the club will be approved by Club staff.
- 6. You must not attempt to gain unauthorized access to the Clubs' network or another person's account. These actions are illegal, even if only for the purpose of "browsing."
- 7. You must not use the Clubs' network to engage in any illegal activity.
- 8. You must not use the Clubs' network for threatening the safety of another person.
- 9. You are responsible for any individual user accounts and should take all reasonable precautions to prevent others from being able to use your account.
- 10. Do not look for security problems, because this may be construed as an illegal attempt to gain access.
- 11. Installing additional software on the Club computers is not permitted.
- 12. Violations may result in the loss of access, as well as other disciplinary or legal actions.