



**TFTC ONLY**

Rcvd By: \_\_\_\_\_

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

# Teen Membership Application

Youth must be between the ages of 13 & 18.

## Parent/Guardian #1 (Head of Household):

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number 1: \_\_\_\_\_

Phone Number 2: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Ag Industry?  YES  NO

Military?:  YES  NO

If YES, BRANCH:  Airforce  Army  Coast Guard  Marine  Navy

Active  Reserve  Guard

RANK: \_\_\_\_\_ DUTY STATION: \_\_\_\_\_

## Parent/Guardian #2:

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number 1: \_\_\_\_\_

Phone Number 2: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Ag Industry?  YES  NO

Military?:  YES  NO

If YES, BRANCH:  Airforce  Army  Coast Guard  Marine  Navy

Active  Reserve  Guard

RANK: \_\_\_\_\_ DUTY STATION: \_\_\_\_\_

## Household Information

Family Size: \_\_\_\_\_

Annual Household Income: \_\_\_\_\_

Primary Language: \_\_\_\_\_

Family Setting:  Both Parents  Mother Only  Father Only

Grandparents  Foster Parents  Legal Guardian

Other Family Member  Other: \_\_\_\_\_

## New Member

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Gender:  Male  Female

Ethnicity:  African American  Asian  Caucasian  Indian

Latino  Other

School: \_\_\_\_\_

Grade: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Last Name: \_\_\_\_\_

Nick Name: \_\_\_\_\_

Eligible for Free/Reduced Lunch:  YES  NO

School District: \_\_\_\_\_

Medical Problems/Allergies: \_\_\_\_\_

**APPLICATIONS WILL NOT BE ACCEPTED UNLESS ALL FIELDS ARE COMPLETE.**

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**Emergency Contact #1:**

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

Relationship: \_\_\_\_\_

Authorized to pickup member:  YES  NO

Phone Number: \_\_\_\_\_

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**Emergency Contact #2:**

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

Relationship: \_\_\_\_\_

Authorized to pickup member:  YES  NO

Phone Number: \_\_\_\_\_

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**Required Consents**

**PHOTO & IMAGE RELEASE:** I acknowledge that The Furnace Teen Center and/or its sponsors may use and print digital photographs as well as video of the youth named on this application for internal and external use. Pictures or videos of Members taken involving The Furnace Teen Center programs or activities used for promotion are the property of The Furnace Teen Center. I consent to such uses and hereby waive all rights of compensation.  YES or  NO \_\_\_\_\_ Initials

**ACADEMIC RELEASE:** I grant The Furnace Teen Center my permission to access my teenager's school records, including attendance, behavior, grades, transcripts and standardized test scores; to speak with teachers, counselors, school administrators and educational partners in order to obtain and exchange information as part of the academic services provided by The Furnace Teen Center. I understand that The Furnace Teen Center may share information about the youth listed on this application with school districts for research purposes and/or to evaluate the academic program's effectiveness. Information that will be disclosed to school districts may include the information provided on this membership application form, information provided by the youth's school or school district, and other information collected by The Furnace Teen Center, including data collected via surveys or questionnaires. All information provided will be kept confidential.  YES or  NO \_\_\_\_\_ Initials

**MEDICAL EMERGENCY AUTHORIZATION:** In the event of a medical emergency involving my teenager during a The Furnace Teen Center's sponsored activity, I understand The Furnace Teen Center will notify me, the parent/guardian as soon as possible. If parent/guardian cannot be located and the children/youth are in need of immediate medical attention, I authorize The Furnace Teen Center staff/volunteer to act as my agent to consent to appropriate medical attention. \_\_\_\_\_ Initials

**CONSENT TO SURVEY:** I grant my permission for my teenager to participate in individual, group and internet surveys used specifically for the purpose of evaluating the impact of The Furnace Teen Center programs.  YES or  NO \_\_\_\_\_ Initials

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**TRANSPORTATION RELEASE:**

**Field Trips & Special Events:** Occasionally The Furnace Teen Center provides field trips for the youth, who are transported by staff/volunteers who have been cleared to drive by The Furnace Teen Center. In these instances, I give my teenager permission to be transported by The Furnace Teen Center's staff/volunteers.  YES or  NO \_\_\_\_\_ Initials

**INFORMATION TECHNOLOGY RELEASE:** I grant The Furnace Teen Center permission for my teenager to have access the virtual teen center through Zoom and technology resource on The Furnace Teen Centers network. The Furnace Teen Center will not be responsible for any damage users may suffer, including but not limited to, loss of data, exposure to inappropriate material or people, or for financial obligations arising through the unauthorized use of the system. Students or parents of students will indemnify and hold The Furnace Teen Center harmless from any losses sustained as the result of misuse of the system by student.  YES or  NO \_\_\_\_\_ Initials

**MEMBER AGREEMENT:** I understand that as a member I will treat other and the organization with respect. I will not use profanity. I understand that The Furnace Teen Center has a ZERO tolerance for bullying and there will be corrective actions if I participate in this behavior. Participating on the virtual teen center Zoom, I will blur my background to protect my personal atmosphere and not share screen unless I have permission to do so. I understand if I do not abide by the rules of The Furnace Teen Center Zoom policies, I will be unable to participate. I fully understand that this organization is faith-based and will have respect regardless of my beliefs \_\_\_\_\_ Member's Initials

**PARENT/GUARDIAN AGREEMENT:** I understand that this organization is faith-based and will respect the foundation of the organization regardless of my beliefs. I understand that a member of The Furnace Teen Center staff/volunteers will be in charge at all times and will take all necessary precautions for the health and safety of the group. It is expressly understood and agreed that The Furnace Teen Center shall not be held responsible, nor legally liable for any losses of personal property, or for any bodily injuries or the results thereof, incurred and suffered by my teenagers on the virtual teen center Zoom site or in connection with any activities, unless such loss or injury results directly from negligence or a willful act of an employee of The Furnace Teen Center acting within the scope of their employment. \_\_\_\_\_ Initials

I agree to the terms and conditions described above and understand that by signing this agreement, I acknowledge that I have read and accept the policies of The Furnace Teen Center. I understand that I can change my permissions at any time by filling out a membership application.

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

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