### Boys & Girls Club - Breakfast Club for students of Liverpool Street Elementary School

At the Club School-day mornings 7:45 am - 8:15 am (when the green pylons are out front, breakfast club is open!)

# A Great Place to Start the Day!

#### Reasons children attend the Breakfast Club:

- They don't have time to eat before leaving home
- They have a hard time eating so early before leaving home
- It is a great way to start their day with friends
- They come every morning OR just when needed
- They love our variety of FREE healthy meals



## Sample Menu

Monday	Tuesday	Wednesday	Thursday	Friday
<ul><li>Cereal</li><li>Bananas</li><li>Milk</li></ul>				<ul><li>French toast</li><li>Melon</li></ul>

# Where is the program located? Offered right off the playground at your neighbourhood Boys and Girls Club!

Do we need to drop our child(ren) off at the program?

You can if you like, but they can come when they arrive at school. Children will be signed in as they arrive either on their way to school, or once they arrive at school by bus and will be signed out when done eating and visually supervised from the Club door until they reach the school playground OR the back door of the school on bad weather days.

# If my child doesn't 'need' the program should we still register? We encourage parents to consider allowing their child to attend even if only 1 or 2 days a week - for any of the reasons

listed above. An inclusive program helps to ensure that children who need the program will feel comfortable to attend. Parents who would like to help can always consider volunteering OR asking what we might need for donated items.

#### Children must pre-register to attending the program - just fill out the form!

For more Information: 472-5112

www.fbgc.ca

Volunteers Needed! As little as one hour per week!





Boys & Girls Club of Fredericton

Did you know?

In the last year, your neighbourhood Boys & Girls Club:

\* Provided over 35,000 healthy snacks and meals



### **Breakfast Program Registration Form 2019/2020**

Facility:	Skyline Acr	es	499 Canter	bury D	Prive	472-5112
Member Information						
Child's Na	me:				Home Phone:	
Birth date	(d/m/y) / /	Age:	Grade:	Identify	: Male □ Female □ N	lon-Binary □
Home Add	dress:	-				
Medicare	#:		Family	Doctor	:	
		Guardia	n Informat	ion		
Parent/Gu	ardian #1:			Rel	ationship:	
Phone #'s	Home:	Worl	k:		Other:	
Email:						
Parent/Gu	ardian #2:				Relationship:	
Phone #'s	Home:	Wor	·k:		Other:	
Email:						
	Emergency Conf	acts (we must b	e able to get	n touch	with someone at all times)	
Contact #	1:			Rel	ationship:	
Phone #'s	Home:	Wor	k:		Other:	
Contact #2	2:			Rel	ationship:	
Phone #'s	Home:	Wor	k:		Other:	
		Addition	al Informa	tion		
To better assist us with meeting your child's needs, are there any areas of their physical, behavioral or emotional well being that we should be aware of? – to be kept confidential (attach separate information if necessary)  Any allergies? (Please indicate all relevant information and attach separate information if necessary)						
Emergency Transportation Policy: If at any time, due to circumstances such as an injury or sudden illness, medical treatment is necessary, I(we) authorize the operator, administrator or staff of Fredericton Boys' and Girls' Club, Inc. to take whatever emergency measures are necessary for the protection of (our) my child while in their care. I understand this may involve applying first aid, calling a physician or nurse, carrying out the instructions given, and/or transporting my(our) child to a hospital, including the possible use of an emergency vehicle. I understand that this may be done prior to contacting me (us) and that any expenses incurred for such treatment, including emergency transportation is my (our) responsibility.						
By signing below you are indicating that you are registering your child in a Fredericton Boys' and Girls' Club Program and that you have read and agree to the information on this form. In consideration of the Fredericton Boys' and Girls' Club Inc. accepting the above minor as a member and/or permitting him/her to enjoy the facilities of the said, the undersigned parent or guardian on behalf of himself/herself and on behalf of the minor applicant, do waive and release each and every right or claim for negligence we and each of us have or may have against the Fredericton Boys' and Girls' Club Inc. its agents, employees, servants or representatives for all and any injuries, accidents or mishaps occasioned by or to above named minor while participating in the activities of or in the care of the said Fredericton Boys' and Girls' Club, Inc.						

Signature of Parent/Guardian:	 Date:	

<sup>\*</sup> This program is closed when there is no school.

\* Parents/Guardians are responsible for reviewing the information form to ensure they understand arrival/departure procedures and time frames as well as other program information.



### Fredericton Boys' and Girls' Club Inc. Media Consent Form – CHILD/YOUTH

Name of Child/Youth:						
Dear Parent or Guardian,						
Your child may participate in an event or activity run by the Fredericton Boys and Girls Club Inc. where photos, video or audio of Club members may be taken for promotional/educational/fundraising purposes. Please read this Media Consent Form carefully and indicate below your permission.						
SECTION 1 – CHILD/YOUTH (18 YEARS OR UNDER) MEDIA CONSENT						
* I hereby give Fredericton Boys and Girls Club Inc.(FBGC) consent of child/youth) first name/image f external partners. My child's/youth's first name(unless otherwise aut newspapers, promotional videos, television commercials, program b displayed to the public or used for other educational/fundraising purp external partners. I release FBGC and its agents from any and all classes.	or promotion purposes related to FBGC and/or horized)/image may be published or used in rochures, posters, on World Wide Web or otherwise poses, either in whole or in part by FBGC, and/or					
☐ I Accept ☐ I Decline						
I certify that I am over 18 years of age and am under no legal or con above.	tractual disability to grant the rights and license					
Print name:						
Parent/Guardian Signature	Date					
SECTION 2 - CONFIDENTIALITY CONCERN						
* If you have a safety concern regarding your child/youth and <b>do not</b> want your child's name/image used for the purposes stated above, please indicate here:						
Child's/Youth's Name	Date					

\* Note: It is the parent/guardian's responsibility to notify the office if the status of this consent changes.