# NON-RESIDENT APPLICATION Teen Center COST \$2.00 Per Visit \$25 for the school year

Participant Information/ 2019-2020 School ID or Proof of Age Required at Staff Request

This facility is open to youth grades 6-12

Name	Phone
Circle one Male Female	
Address	Town
Age Grade	
School	Date of Birth
Parent/Guardian	
Work Phone	Home Phone
Parent/Guardian	
Work Phone	Home Phone
Center	Guidelines
<ul> <li>Possession or use of alcoholic beverages of No Smoking allowed in or around the cent Foul Language is not acceptable.</li> <li>Rights and safety of all others must be resp</li> <li>Participants must follow staff direction for</li> </ul>	er or skate park. Dected at all times.
For Non-Residents there is a	<b>Consequences</b> ZERO TOLERANCE POLICY. ot followed you may not return to the center.
Health Information: Are there any health Yes / NO If Yes what are they.	a concerns we need to be aware of?

Signature\_\_\_\_\_

Date
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#### Video game/ computer guidelines:

- No Food or Drinks allowed near Video games or Computers even if closed.
- Only you can sign yourself up for use in the reservation booklet located at the snack bar counter. Please include the date, time, name, what game/computer number and controllers you are using.
- Each session is for 30 minutes. You can only sign up for one session at a time (this includes playing together example: two player game). At the end of your session if the spot is available you may resign-up.
- Do not download or change any settings without asking a staff member first.
- No swearing. This includes all music, jokes, videos, messaging/emails or other materials.
- All games and websites need to be rated Teen or pg-13 and lower. This includes all music, jokes, videos, messaging/emails or other material. If you bring in a game from home the Teen Center Staff need to approve the game before you can play it.
- There should be no arguing about game play or use. The person who signed out the game/computer have control of the game play during that session
- It is your responsibility to get to your session when it's your turn. Staff will not be making sure you get there on time.
- Those who leave their sessions early pass the rest of their time onto the next user.
- The sessions end at 5:30 pm no exceptions.

### Video game

• Make sure to return all equipment to the counter and turn off the system/TV at the end of your turn. It is your responsibility to return them to the staff.

## Computer

- Make sure to sign out of all of your programs before leaving your session so others cannot view your information. Do not allow your programs to auto boot or save passwords, if you're not sure now to stop this then see a staff member.
- Teens on the computer at the 5:30 session must shut down the computer including monitor and speakers and return all accessories to the counter.

### If you are caught not following these rules the following steps will happen depending on the severity of the offense

 $\begin{array}{l} 1^{st} \mbox{ offence} - \mbox{ warning} \\ 2^{nd} \mbox{ offense} - \mbox{ no computer/video game use for 1 week} \\ 3^{rd} \mbox{ offense} - \mbox{ no computer/video game use for 2 weeks} \\ 4^{th} \mbox{ offense} - \mbox{ no computer/video game use for the rest of the school year.} \end{array}$ 

These policies were revised by the Teen Center committee in May 2017. I have read the rules for the computer and video game use. I agree to these rules by signing below.

Name

Date

### BIDDEFORD RECREATION DEPARTMENT P. O. Box 586 BIDDEFORD, MAINE 04005 PHONE 207-283-0841 FAX 207-286-0575

#### **Please read carefully**

#### Release

I understand there are risks of physical injury in participating in sports and recreational activities or programs.

I hereby release the City of Biddeford, its employees, officials and agents from any and all liability or loss or damage to personal property that, my child or I may experience in connection with activities sponsored by Biddeford Recreation Department.

I hereby consent to emergency medical procedures deemed advisable for my child in the event I cannot be reached and my child has sustained an injury. The Dept. does not provide accident or hospitalization insurance for participants of its programs. All participants are advised to have adequate personal coverage. Please consider participant's own health, experience, and tolerance for risk before participating in any program. I also consent to the use of me or my child's photo, video, artwork etc. by the dept for flyers, presentations etc.

This release and consent shall remain in full force and effect for all future recreational activities and programs until revoked in writing by registrant.

Signature

Date

Name Printed

Child's Name