



**Teen Center  
Membership  
Application**

Welcome to the One-Eighty Teen Center! In our continuing effort to establish One-Eighty Programs as a safe, fun, positive experience for the youth (grades 7-12) of Lodi, this form is to be signed by both the student and the parent, and must be returned to the One-Eighty Teen Center by the third visit. There is no cost to be a member of One-Eighty Programs. Please provide the following information for us:

**PERSONAL INFORMATION: PLEASE PRINT CLEARLY**

Student's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Birthday: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

- May we photograph your student to be displayed in the Teen Center or to be used in One-Eighty Programs Promotional materials: Yes \_\_\_\_\_ No \_\_\_\_\_
- We offer a variety of clubs throughout the year (film making, Trade Shop, baking, rock climbing, gardening, guitar classes, etc.). Is your student given permission to participate: Yes \_\_\_\_\_ No \_\_\_\_\_
- Please list any Medical Conditions or additional information we need to know about:

**FAMILY INFORMATION: PLEASE FILL OUT THE APPLICABLE INFORMATION**

Parent/Legal Guardian 1: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Legal Guardian 2: \_\_\_\_\_ Phone: \_\_\_\_\_

Siblings: Name \_\_\_\_\_ Age/Grade: \_\_\_\_\_

Name \_\_\_\_\_ Age/Grade: \_\_\_\_\_

Name \_\_\_\_\_ Age/Grade: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**THE FOLLOWING RULES AND GUIDELINES ARE CURRENTLY IN EFFECT AT ONE-EIGHTY**

- Adults must be accompanied by a minor
- Students must be currently enrolled in either Jr. High or High School
- No disrespect of One-Eighty students, staff, property, or programs
- No fighting or violence

## **RULES CONTINUED**

- No bullying or verbal abuse
- No profanity or inappropriate language
- No inappropriate attire (The Lodi Unified School District dress code will be enforced)
- No PDA (Public Display of Affection). This applies to anything beyond holding hands or hugging.
- No alcohol, drugs, or corresponding paraphernalia
- No weapons of any kind (knives, spiked bracelets, etc.)
- No sexually explicit material
- No gang representation/activity

Students who come to the One-Eighty Teen Center agree to abide by One-Eighty Programs rules. Consistent disrespect & failure to cooperate with us in making the One-Eighty Programs a safe, fun, and positive experience for all students will result in expulsion from the Teen Center. We reserve the right to refuse admission to any student on the basis of our rules and guidelines. By signing below, you agree to follow the above guidelines.

Signed (Student): \_\_\_\_\_ Date: \_\_\_\_\_

Signed (Parent/Guardian): \_\_\_\_\_ Date: \_\_\_\_\_

## **COVID-19**

Due to the COVID-19 pandemic, please do not enter this facility if you are experiencing cold/flu-like symptoms or have come in contact with someone with COVID-19 in the past 10 days. By entering this facility you assume the risk for you and your family of transmission of COVID-19. Masks are required indoors unless eating or drinking, or sitting at a table, while the state mandate is in effect.

Signed (Student): \_\_\_\_\_ Date: \_\_\_\_\_

Signed (Parent/Guardian): \_\_\_\_\_ Date: \_\_\_\_\_

## **DEMOGRAPHIC INFORMATION**

Improvements to the One-Eighty Teen Center will be funded by the US Department of Housing and Urban Development (HUD). HUD Requires the City to collect information on the income and ethnicity of program participants. The information being requested will be kept securely and will not be made available to the public. Thank you for your cooperation.

### **Ethnicity:**

Hispanic (Check One)  Yes  No

### **Race (Check One):**

- Caucasian
- African-American
- Asian
- Native American/Native Alaskan
- Native Hawaiian/Other Pacific Islander

Prefer not to answer

### **Multi-Race:**

- Native American/Alaskan & Caucasian
- Asian & Caucasian
- African-American & Caucasian
- Native American/Alaskan & African-American
- Other Multi-Racial

**Household Characteristics:** Disabled Member in Household:  Yes  No  
Female Head of Household:  Yes  No

- Does your student receive free or reduced lunch?  Yes  No

**Income:** Please circle the number of members in your household. Then circle whether your gross household income is more or less than the amount shown in that column. Gross income means the total income of everyone in your household before taxes and deductions are taken out.

**Number of Household Members (Circle One):**

1                    2                    3                    4                    5                    6                    7                    8

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Less	Less	Less	Less	Less	Less	Less	Less
\$35,350	\$40,400	\$45,450	\$50,500	\$54,550	\$58,600	\$62,650	\$66,700
More	More	More	More	More	More	More	More

I hereby certify that the above information is true and correct to the best of my knowledge. I understand that this self-certification may be subject to further verification by the agency providing services, the City, or HUD.

Signed (Parent/Guardian): \_\_\_\_\_ Date: \_\_\_\_\_



**ACTIVITY  
PARTICIPATION  
AGREEMENT**

**THIS AGREEMENT SHALL APPLY TO ALL ONSITE ACTIVITIES AT THE ONE-EIGHTY TEEN CENTER, INCLUDING THE CLIMBING WALL, SKATE RAMPS, BASKETBALL COURT, AND ALL ORGANIZED OUTDOOR GAMES & ACTIVITIES.**

NAME OF PARTICIPANT: \_\_\_\_\_ AGE: \_\_\_\_\_

NAME OF PARENTS/GUARDIANS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**In the event of an emergency, if the above people are not available, please contact:**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

INSURANCE COMPANY: \_\_\_\_\_ POLICY # \_\_\_\_\_

NAME OF INSURED: \_\_\_\_\_ )))GROUP#: \_\_\_\_\_

I acknowledge that participation in the activity described above involves risk to the participant (and to the participant's parents or guardians, if the participant is a minor), and may result in various types of injury including, but not limited to, the following: sickness, bodily injury, death, emotional injury, personal injury, property damage, and financial damage.

In consideration for the opportunity to participate in the activity described above (the "activity"), the participant (or parent/ guardian if the participant is a minor) acknowledges and accepts the risks of injury associated with participation in and transportation to and from the activity. The participant (or parent/ guardian) accepts personal financial responsibility for any injury or other loss sustained during the activity or during transportation to and from the activity, as well as for any medical treatment rendered to the participant that is authorized by One- Eighty Programs or its agents, employees, volunteers, or any other representatives (collectively referred to as the "activity sponsor"). Further, the participant (or parent/ guardian) releases and promises to indemnify, defend, and hold harmless the activity sponsor for any injury arising directly or indirectly out of the described activity or transportation to and from the activity, whether such injury arises out of the negligence of the activity sponsor, the participant, or otherwise.

If a dispute over this agreement or any claim for damages arises, the participant (or parent/guardian) agrees to resolve the matter through a mutually acceptable alternative dispute resolution process. If the participant (or parent/guardian) and the activity sponsor cannot agree upon such a process, the dispute will be submitted to a three-member arbitration panel for resolution in accordance with the rules of the American Arbitration Association.

\_\_\_\_\_  
Signature of Participant Date

\_\_\_\_\_  
Signature of Parent or Guardian Date