



FOR YOUTH DEVELOPMENT®  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

# TEENS IN ACTION



## 2023 Summer Teens in Action Program Reidsville Family YMCA

**YMCA Summer Teens in Action:** The Reidsville Family YMCA is proud to offer an innovative teen program. 13-18 year old teens can apply to our program to gain a free summer membership and take part in personal and team development activities throughout their session. Activities include; assisting with our summer day camp, shadowing full time directors, college tours, financial literacy classes, and physical fitness. Sessions are 3 weeks long and teens must participate in at least 6 activities each week to remain in the program. An application completed by the teen and interview are required prior to registration.

**AGES:** 13-18\* year olds (18-year-olds must be rising High School Seniors)

### **PROGRAM BENEFITS:**

FREE Teen Membership throughout 3-week program will allow teens to access the YMCA facility to workout or attend group exercise classes when not participating in a program activity.

### **Teens apply at the YMCA front desk!**

Contact Jennifer Stadler, Program Director at (336) 342-3307 or [jennifer.stadler@ymcagreensboro.org](mailto:jennifer.stadler@ymcagreensboro.org) for details.



# 2023 Teens in Action Registration

Please print all information clearly

For Office Use Only:  
Date turned in:

ID: \_\_\_\_\_  
JUN23 or JUL23  
08FSTEENS

Teen Full Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Teen Cell Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Upcoming Grade (Fall 2023) \_\_\_\_\_

T-Shirt Size (circle one): AS AM AL AXL

Circle session you are applying: June 19<sup>th</sup>-30<sup>th</sup>, & July 10<sup>th</sup>-14<sup>th</sup> OR July 24<sup>th</sup>- August 11<sup>th</sup>

Ethnicity (optional):

Caucasian African American Asian Hispanic Native American Bi Racial Other \_\_\_\_\_

1 <sup>st</sup> Parent/Guardian: _____	Cell Phone: _____	Gender: _____
Place of Work: _____	Work Phone: _____	
2 <sup>nd</sup> Parent/Guardian: _____	Cell Phone: _____	Gender: _____
Place of Work: _____	Work Phone: _____	

## Emergency Contacts (other than parents/guardians)

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

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

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

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

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

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

## Teen Health History and Behavior Profile

1. Does your teen wear glasses/contacts: Yes: \_\_\_\_ No: \_\_\_\_
2. Do they currently under care of a physician: Yes: \_\_\_\_ No: \_\_\_\_  
If yes, please explain why \_\_\_\_\_
3. Do they currently taking any medications? Yes: \_\_\_\_ No: \_\_\_\_  
If yes, please explain what \_\_\_\_\_
4. Do they have any allergies? Yes: \_\_\_\_ No: \_\_\_\_  
If yes, please explain \_\_\_\_\_
5. Do they need special assistance of any type? Yes: \_\_\_\_ No: \_\_\_\_  
If yes, please explain \_\_\_\_\_
6. Has your teen had a recent injury: Yes: \_\_\_\_ No: \_\_\_\_  
If yes, please explain \_\_\_\_\_
7. Does your teen have diabetes, seizures and frequent fainting/dizziness? Yes: \_\_\_\_ No: \_\_\_\_  
If yes, please explain \_\_\_\_\_
8. Does your teen have any back, neck, or shoulder pain or injury? Yes: \_\_\_\_ No: \_\_\_\_  
If yes, please explain \_\_\_\_\_
9. Does your teen have a history of health problems or high blood pressure? Yes: \_\_\_\_ No: \_\_\_\_ If yes, please explain \_\_\_\_\_
10. How does your child interact with kids younger than them?  
\_\_\_\_\_  
\_\_\_\_\_
11. Are there any behaviors we should be aware of that may affect their interaction with others at the Y? Yes: \_\_\_\_ No: \_\_\_\_ If yes, please explain \_\_\_\_\_  
\_\_\_\_\_
12. Does your child have any experience being picked on or bullied in school? Yes: \_\_\_\_ No: \_\_\_\_  
If yes, please explain \_\_\_\_\_

## Field Trip Permission: Bus

I give permission for my teen, \_\_\_\_\_, to be transported by YMCA bus to and from scheduled field trip locations and outings during the Summer of 2023.

I understand that the YMCA will abide by all the safety rules when my teen is transported by bus. The YMCA will also notify me each time that my teen is to participate in an activity that would involve transportation.

I understand that my teen will be in the company of other teens and within sight of a YMCA employee at all times while on field trips. **I further understand that if my teen is dropped off at the YMCA after the YMCA bus has departed then they will not go on that field trip. Your teen may not be dropped off at any other location other than the Y.** I understand that the YMCA will not be responsible for my teen's personal belongings while on field trips, including any money and/or souvenirs.

Signature of Parent/Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Teen: \_\_\_\_\_ Date: \_\_\_\_\_

## Teen Code of Conduct

It is expected that as our guest you will follow all the rules and regulations set below. Please be aware that staff has the right to deny you entry if you are acting at all suspicious. Staff also has the right to ask you to leave at any time if there are any violations of any rules set below. Please initial each number in the code of conduct.

PLEASE HAVE TEEN INITIAL EACH LINE

1. The YMCA is a DRUG, WEAPON and ALCOHOL FREE area, any violation of this policy will result in the calling of local authorities and being banned indefinitely from the facility. \_\_\_\_\_
2. Foul language will not be tolerated. Swearing and other offensive words are not allowed. \_\_\_\_\_
3. Bullying (including cyber bullying), hazing, harassment, intimidation, name-calling, sexual innuendos, and verbal and physical aggression are prohibited. YMCA staff will have final say on what is considered offensive or bullying. \_\_\_\_\_
4. Inappropriate physical contact will not be tolerated. This includes pushing, punching, kicking, slapping, hitting or anything else considered unsuitable, such as sexual behavior, for the YMCA atmosphere. YMCA staff has final say on what is inappropriate. \_\_\_\_\_
5. Adult locker rooms are OFF LIMITS; you may use youth locker rooms. \_\_\_\_\_
6. Using equipment in an inappropriate fashion will result in dismissal. YMCA staff will have final ruling on what is unacceptable. \_\_\_\_\_
7. Upon arriving at our facilities you must sign in by printing your name, arrival time, date and signature in the Teen Program book at the front desk. \_\_\_\_\_
8. Teens will clean up after themselves. Dispose of trash and leave areas clean and organized. \_\_\_\_\_
9. Should a teen be dismissed from the YMCA, he/she must vacate the building/surrounding property and will have his/her membership terminated. \_\_\_\_\_
10. The Y reserves the right to inspect any bag a teen brings into a branch or on our property. \_\_\_\_\_
11. Teens will not in any way endanger themselves or others while on YMCA property and/or while participating in YMCA events. \_\_\_\_\_
12. Any theft or suspicion of theft will be investigated by YMCA staff and local authorities if necessary. Participant may be subject to dismissal from program, banning from facility, and/or legal actions. \_\_\_\_\_
13. Overall time spent in Y facility will be limited around program participation time. YMCA staff have final say in how much time is able to be spent at the Y. \_\_\_\_\_

## The Discipline Policy

1. If a teen is unable to comply with the behavior expectations, the teen will meet with the Program Director and the parent/guardian will be notified in writing or will receive a phone call.
2. If a teen has a 2<sup>nd</sup> behavior incident, they will meet with the Program Director and Executive Director, a behavior contract will be made, and the parent will be notified over the phone as well as in writing.
3. If the teen's behavior continues to be disruptive and/or unsafe, the teen will be subject to suspension or dismissal from the program and the program provided membership will be terminated.

4. Failure of the parent(s)/guardian(s) to discuss the behavior in person or over the phone and cooperate, will subject the teen to suspension or dismissal and the program provided membership will be terminated.

**\*We reserved the right to bypass the steps in our discipline policy depending on the severity of the situation or the outcome of the meetings with the Program Director.**

I, the undersigned parent or guardian of \_\_\_\_\_ (teen's full name), do hereby state that I have read and understand the Rockingham County YMCA Teen Code of Conduct and Discipline Policy. I, \_\_\_\_\_, (teen's full name) understand that I am a guest of the Reidsville YMCA and shall abide by its rules at all times, anywhere on YMCA property, or anywhere offsite while participating in a YMCA activity or event. I understand the YMCA celebrates its four core values (caring, honesty, respect and responsibility) and I am expected to reflect these characteristics at all times. I agree to be respectful to staff, members, equipment and facilities, and will comply with these rules at all times. I certify all information on this document is correct. Should you break this contract, your membership will be suspended or terminated. Please read carefully before signing.

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Teen: \_\_\_\_\_ Date: \_\_\_\_\_

## **Participant Agreement**

The Rockingham County YMCA offers a safe environment for teens throughout but not limited to the Reidsville area to work, learn and have fun. In order to gain participant status, all teens must agree to the following:

1. Completion of the application process and interview.
2. Completion of the code of conduct.
3. To remain in appropriate areas of the building. Therefore, allowing other members and programs use of the facilities.
4. Follow all rules stated in this contract.

I have read all the above Participation Agreement and abide by its terms.

Teen Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

## **Teens in Action Questionnaire**

Why are you interested in participating in the Teens in Action program?

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What extracurricular activities have you participated throughout school or summer time?

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What do you like to do for fun?

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How would your friends and family describe you?

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How do you handle conflict with a friend?

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What do you hope to gain from the program?

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Describe a time when you have worked with children between the ages of 5 and 12 years old?

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What are your plans for career or post high school education?

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What is something you are passionate about? Why?

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