

ROCKETTOWN



MEMBERSHIP APPLICATION

EACH MEMBER RECEIVE A ROCKETTOWN MEMBERSHIP CARD, WHICH WILL BE USED FOR SIGNING IN, KEEPING TRACK OF MEAL PLANS, AND EARNING/REDEEMING POINTS FOR ROCKETTOWN REWARDS BY CHECKING INTO DIFFERENT ACTIVITIES AND EVENTS.

THE INFORMATION THAT YOU ARE PROVIDING ON THIS FORM WILL ONLY BE USED FOR RECORD-KEEPING AND GENERATING ANONYMOUS REPORTS. NO PERSONAL INFORMATION WILL BE SHARED WITH ANY OUTSIDE GROUP OR PERSON.

***MEMBER INFORMATION:**

NAME: _____ DATE OF BIRTH: _____
FIRST LAST

GENDER: FEMALE MALE I CHOOSE NOT TO ANSWER SCHOOL: _____

RACE (CHECK ONE): ASIAN BLACK/AFRICAN-AMERICAN HISPANIC/LATINO WHITE/CAUCASIAN TWO OR MORE RACES
 MIDDLE EASTERN NATIVE AMERICAN PACIFIC ISLANDER OTHER: _____

HOME ADDRESS: _____ EMAIL: _____
STREET

CITY STATE ZIP CELL PHONE NUMBER: _____



@ _____



@ _____

WHICH OF THESE ACTIVITIES AND PROGRAMS WILL YOU PARTICIPATE IN? (CHECK ALL THAT APPLY.)

- *CREATIVE AND PERFORMING ARTS PROGRAMMING (INCLUDES RECORDING STUDIO, FILM, DANCE, ART, MUSIC, GRAPHIC DESIGN, AND MORE)
- *SPORTS & RECREATION PROGRAMMING (INCLUDES BASKETBALL, YOGA, STREET HOCKEY, AND MORE)
- *ACADEMIC ASSISTANCE (INCLUDES HOMEWORK HELP, TUTORING, SCIENCE PROJECTS, AND MORE)
- *COFFEE BAR ACTIVITIES (INCLUDES COOKING CLASSES, COFFEE BAR TRIVIA, GAME NIGHTS, WISDOM & EATS, AND MORE)
- *STUDENT VOLUNTEER/JOB SHADOWS (ADDITIONAL PAPERWORK REQUIRED)
- SIXTH AVENUE SKATEPARK (SEPARATE WAIVER REQUIRED)
- MUSIC VENUE SHOWS/CONCERTS
- SKATE CHURCH/FAMILY DINNER
- HANGING OUT IN THE COFFEE BAR
- MEAL PLAN (ADDITIONAL FORMS REQUIRED)
- COUNSELING SERVICES (ADDITIONAL FORMS REQUIRED)
- *OTHER (PLEASE LIST) _____

*** IF YOU CHECKED ANY OF THESE BOXES, PLEASE GET THE BACK OF THIS PAPER COMPLETED AND SIGNED BY A PARENT/GUARDIAN.**

WHAT TYPE OF ITEMS WOULD YOU LIKE TO SEE IN THE ROCKETTOWN REWARDS SHOP? _____

WHAT TYPE OF ACTIVITIES WOULD YOU LIKE TO SEE OFFERED AT ROCKETTOWN? _____

ROCKETTOWN EXPECTATIONS

ROCKETTOWN EXPECTS ALL VISITORS AND PARTICIPANTS TO:

- BE RESPECTFUL (SHOW RESPECT TO OTHERS , ROCKETTOWN, AND YOURSELF)
- BE RESPONSIBLE (TAKE RESPONSIBILITY FOR YOUR OWN ACTIONS AND BELONGINGS)

NO DRUGS, ALCOHOL, WEAPONS, VANDALISM, FIGHTING, SEXUAL BEHAVIOR, BULLYING, GANG REPRESENTATION, OR OFFENSIVE LANGUAGE WILL BE TOLERATED AT ROCKETTOWN.

ANY BEHAVIOR NOT MEETING THESE EXPECTATIONS WILL RESULT IN CORRECTIVE ACTION FROM THE STAFF.

PROGRAMMING POLICIES AND PERMISSIONS

TO BE COMPLETED BY A PARENT/GUARDIAN

ROCKETOWN MISSION AND VISION:

MISSION - TO OFFER HOPE TO THE NEXT GENERATION THROUGH CHRIST'S LOVE.

VISION - TO BE THE PLACE OF PEACE, PURPOSE AND POSSIBILITIES FOR YOUTH.

ROCKETOWN PROGRAMMING:

ROCKETOWN OFFERS OUT-OF-SCHOOL PROGRAMMING AT NO COST TO PARTICIPATING YOUTH OR FAMILIES. PROGRAM ACTIVITIES FOCUS ON PROVIDING OPPORTUNITIES OF ENRICHMENT AND ENGAGEMENT FOR 12-18 YEAR-OLD STUDENTS IN THE AREAS OF PERFORMING AND CREATIVE ARTS, SPORTS AND RECREATION, AND ACADEMIC ASSISTANCE. VARIOUS OPPORTUNITIES WILL BE OFFERED DAILY BETWEEN 3:30-6:30PM AND PARTICIPANTS WILL BE GIVEN MULTIPLE OPTIONS TO CHOOSE FROM THROUGHOUT THE WEEK. PROGRAM OFFERINGS WILL REGULARLY CHANGE, SO THERE WILL BE PLENTY OF OPPORTUNITIES TO TRY NEW THINGS AND TO FIND SOMETHING THEY LIKE.

ROCKETOWN POLICIES:

- ROCKETOWN IS A WALK-UP FACILITY AND IS THEREFORE NEITHER RESPONSIBLE FOR PROVIDING TRANSPORTATION TO AND/OR FROM THE FACILITY NOR KEEPING ANY PARTICIPANT ON THE ROCKETOWN PROPERTY.
- ROCKETOWN IS NOT RESPONSIBLE FOR ANY ACCIDENT OR INJURY THAT MAY OCCUR ON OR OFF THE ROCKETOWN PROPERTY, INCLUDING ANY INCIDENT THAT MAY TAKE PLACE ON THE MTA BUS OR MTA CENTRAL STATION.
- ROCKETOWN IS NOT RESPONSIBLE FOR ADMINISTERING OR STORING MEDICATIONS.
- ROCKETOWN IS NOT RESPONSIBLE FOR ANY ITEMS THAT MAY BE LOST OR STOLEN.

PARTICIPANT PERMISSIONS:

AS THE LEGAL GUARDIAN OF _____, I AGREE TO GIVE ROCKETOWN PERMISSION TO:

PARTICIPANT'S NAME

- HAVE THE SCHOOL RELEASE MY CHILD'S RECORDS THAT MAY CONTAIN PERSONAL INFORMATION (SUCH AS GRADES, ATTENDANCE, BEHAVIOR, IEPs, HEALTH RECORDS, ETC.) AND TO SHARE THIS INFORMATION WITH ROCKETOWN, AS PERTINENT TO HELP MY CHILD SUCCEED IN SCHOOL.
- PHOTOGRAPH OR DIGITALLY RECORD MY CHILD FOR MEDIA AND WEB PUBLICATIONS.
- ALLOW NON-ROCKETOWN MEDIA OUTLETS TO PHOTOGRAPH OR DIGITALLY RECORD MY CHILD AT ROCKETOWN.
- HONOR MY CHILD PUBLICLY, INCLUDING IN THE MEDIA.

THE SIGNATURE BELOW ACKNOWLEDGES THAT I HAVE READ AND UNDERSTAND THE POLICIES OF ROCKETOWN AND THAT I CONFIRM THAT ALL OF THE PERMISSIONS LISTED ABOVE APPLY TO MY CHILD FOR THE DURATION OF THEIR TIME AT ROCKETOWN.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____
(OR MEMBER IF 18 OR OLDER)

PARENT/GUARDIAN PRINTED NAME: _____ RELATION: _____
(OR MEMBER IF 18 OR OLDER)

PHONE: _____ EMAIL: _____

EMERGENCY CONTACT

IN THE EVENT OF AN EMERGENCY, WHO SHOULD WE CONTACT?

NAME: _____ RELATIONSHIP TO PARTICIPANT: _____

CONTACT PHONE NUMBER: _____ BACKUP PHONE NUMBER: _____

****IF YOUR CHILD HAS ANY MEDICAL CONCERNS, INCLUDING ALLERGIES OR DISABILITIES, THAT ROCKETOWN NEEDS TO BE AWARE OF, PLEASE INFORM THE ROCKETOWN STAFF IN WRITING WITH THE RETURN OF THIS FORM. ALSO INCLUDE ALL NECESSARY INSURANCE AND PHYSICIAN INFORMATION.**

{RETURN THIS FORM TO WILL PRICE / WPRICE@ROCKETOWN.ORG / 615-843-4001 x210 / 601 4TH AVENUE SOUTH, NASHVILLE, TN, 37210}