



## Social Services - Youth Center Supplemental Application

### Youth Community Center

1. Please check all activities offered:

☐ Bicycling

☐ Go Karts

☐ Ice Hockey

☐ Inline Skating

☐ Motorbikes/Minibikes

☐ Motorcycles/ATV's

☐ Paintball

☐ Scuba Diving

☐ Skateboarding

If the Organization offers other activities not listed above, please describe these activities: \_\_\_\_\_

2. Does Organization require signed waivers of liability from the parents or legal guardians of participants in club activities? ☐ Yes ☐ No
3. Does Organization have procedures in place to restrict access to authorized persons? ☐ Yes ☐ No
4. Does Organization provide overnight living? ☐ Yes ☐ No
5. Does Organization have a swimming pool(s) on premises? ☐ Yes ☐ No
6. Does Organization provide overnight trips? ☐ Yes ☐ No
7. Does Organization require all participants in organized sporting activities to be covered by Accident and Health or Medical Insurance? ☐ Yes ☐ No
8. Does Organization have a procedure in place to assure a proper staff to child ratio? ☐ Yes ☐ No
9. Does Organization facilitate health screenings and other medical services?  
If yes, do contracted physicians and nurses provide certificates of general liability and medical malpractice insurance to the Organization? ☐ Yes ☐ No
10. Do recipients of health screenings and other medical services sign waivers of liability in favor of Organization? ☐ Yes ☐ No
11. Does Organization have a formal procedure in place to report accidents or incidents involving participants? ☐ Yes ☐ No
12. Is organization's primary focus to provide services to children with special needs? ☐ Yes ☐ No

### Big Brother/Big Sister (One on One Youth Mentoring)

13. Does Organization sponsor overnight trips outside of the USA, USA Territories or Canada? ☐ Yes ☐ No
14. Does Organization require signed permission and a signed waiver of liability from child's custodial parents/guardians concerning overnight trips? ☐ Yes ☐ No
15. Does Organization have in excess of 300 volunteers? ☐ Yes ☐ No