



# 2017 NORTHEAST REGIONAL TORCH CLUB SUMMIT

SHELTON, CONNECTICUT  
APRIL 22-23, 2017

Dear Northeast Torch Club Advisors,

We are excited to invite you to the 2017 Northeast Regional Torch Club Summit hosted at the Boys & Girls Club of the Lower Naugatuck Valley Laviates Unit in Shelton, CT. **The Summit will take place on April 22-23, 2017.** We are working on putting together a great event for you all to attend!

The purpose of the Torch Club Summit is to bring together Clubs from across the Northeast Region and encourage members to:

- Participate in engaging workshops which will provide them with the skills and tools to have an effective and successful Torch Club.
- Meet with peers from around the region to learn, speak about and share ideas about current youth issues; and
- Reward Torch Club members for their hard work all year by having two days packed with fun and the opportunity to make great memories!

In order to fully participate in the Summit, please make sure your participants bring appropriate clothing for being physically active during the two days along with the following:

- Sleeping bag and pillow
- Any needed toiletries and medications and
- Showering necessities, i.e. towel, shower shoes and bathing suit

**There is a \$50 registration fee per participant (youth and staff) which must be paid by cash or check by Friday, April 7<sup>th</sup>, 2017. Checks can be made payable to the Boys & Girls Club of the Lower Naugatuck Valley. All attached documents must be sent to: Boys & Girls Club LNV, One Positive Place, Shelton, CT 06484 and received by Friday, April 7<sup>th</sup>, 2017. We ask that due to space and to maximize the number of Clubs that can participate, we ask that each club only register a total maximum of 20 participants.**

Additionally, we encourage you and your Torch Club to submit nominations for the Torch Club Advisor of the Year and Torch Club Awards - this is a great opportunity to allow your members to review their year of activities and submit projects for potential recognition. These nomination forms are also due by Friday, April 7<sup>th</sup>, 2017.

If you have any questions, please do not hesitate to contact us at [TORCHCLUB@BGC-LNV.ORG](mailto:TORCHCLUB@BGC-LNV.ORG).

**Thank you - we can't wait to see you!**

**One Positive Place, Shelton, CT 06484**  
www.BGC-LNV.org \* 203.924.9329  
TORCHCLUB@BGC-LNV.org



# TORCH CLUB REGISTRATION

2017 NORTHEAST REGIONAL

TORCH CLUB SUMMIT

SHELTON, CONNECTICUT

APRIL 22-23, 2017

Club Name: \_\_\_\_\_

Unit Name (if applicable): \_\_\_\_\_

Torch Club Name: \_\_\_\_\_

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

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

Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ E-mail Address: \_\_\_\_\_

TORCH CLUB MEMBER NAME	AGE	T-SHIRT SIZE	EMERGENCY CONTACT NAME	EMERGENCY CONTACT PHONE

**All completed forms should be sent to:**  
 2017 Northeast Regional Torch Club Summit  
 Boys & Girls Club of the Lower Naugatuck Valley  
 1 Positive Place  
 Shelton, CT 06484  
 or emailed to: [TORCHCLUB@BGC-LNV.org](mailto:TORCHCLUB@BGC-LNV.org)



# CPO REGISTRATION

2017 NORTHEAST REGIONAL

TORCH CLUB SUMMIT

SHELTON, CONNECTICUT

APRIL 22-23, 2017

Club Name: \_\_\_\_\_

Unit Name (if applicable): \_\_\_\_\_

**Chief Professional Officers:** Please read the following carefully and sign below, indicating your agreement to these conditions:

- Torch Club members and advisors attending the Summit will be briefed on the Behavior Code prior to their departure. If there is an issue with delegates from my Club violating the Code, I understand I may be contact by the Boys & Girls Club of the Lower Naugatuck Valley during the Summit to address these issues.
- I hereby certify that the following adult staff and volunteers who are registered to attend the 2017 Northeast Regional Torch Club Summit have undergone a criminal background check in accordance with the Boys & Girls Clubs of American membership requirements.

## REGISTERED ADULT STAFF/VOLUNTEERS

_____	_____
_____	_____
_____	_____

\_\_\_\_\_  
Name of CPO

\_\_\_\_\_  
Signature of CPO

\_\_\_\_\_  
Date

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Boys & Girls Club of the Lower Naugatuck Valley  
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Shelton, CT 06484  
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# BEHAVIOR CODE FOR ADVISORS

2017 NORTHEAST REGIONAL

TORCH CLUB SUMMIT

SHELTON, CONNECTICUT

APRIL 22-23, 2017

Club Name: \_\_\_\_\_

Unit Name (if applicable): \_\_\_\_\_

*The role that advisors play at the Northeast Torch Club Summit is crucial. Advisors provide support for all aspects of the Summit, including assisting with registration, security and facilitation of session. The most important support that an advisor offers, however, is that of a role model to his or her Torch Club. The following code describes the expected behavior of advisors.*

- Advisors must attend all advisor sessions.
- It is required that all advisors and members must stay overnight at the Summit and stay for the entirety of the Summit.
- Advisors should ensure their Torch Club members are on time and prepared to participate in all sessions.
- Advisors are expected to assist with tasks throughout the conference. Please model graciousness and consistent willingness to help when asked.
- Advisors should make certain that Torch Club members are dressed appropriately at all times. There should be no T-shirts or other clothing with profanity, inappropriate imagery or sexual or racial innuendo. Pants should not sag to expose undergarments. See-through or revealing clothing should not be worn. No hats, do-rags or scarves are allowed at the Summit. Attire that exposes the midriff or has spaghetti straps is inappropriate at the conference. Advisors should also adhere to these dress requirements.
- Advisors must make certain that Torch Club members do not bring portable electronics including iPads, iPods, iPhones, MP3 players or video games into sessions. If a Torch Club member must bring a cell phone, it must be turned off or silenced in all sessions.
- All adult advisors must be **21 years or older** to attend the Summit.
- Advisors must wear name tags at all times during the Summit.
- Absolutely no drugs, alcohol or sexual activity will be tolerated at the Summit. This includes smoking in the presence of Torch Club members or on the Boys & Girls Club of the Lower Naugatuck Valley's property.

***In case of serious misconduct or repeated misbehavior, the Torch Club advisor is responsible for making arrangements with his or her CPO/Unit Director to return Torch Club members home safely prior to the completion of the Summit.***

\_\_\_\_\_  
Signature of CPO

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Torch Club Advisor(s)

\_\_\_\_\_  
Date

***All completed forms should be sent to:***  
*2017 Northeast Regional Torch Club Summit*  
*Boys & Girls Club of the Lower Naugatuck Valley*  
*1 Positive Place*  
*Shelton, CT 06484*  
*or emailed to: TORCHCLUB@BGC-LNV.org*



# BEHAVIOR CODE FOR MEMBERS

2017 NORTHEAST REGIONAL

TORCH CLUB SUMMIT

SHELTON, CONNECTICUT

APRIL 22-23, 2017

Club Name: \_\_\_\_\_

Unit Name (if applicable): \_\_\_\_\_

*To ensure the Northeast Regional Torch Club Summit is a positive and enjoyable growth experience for all participants, it is necessary to establish and enforce high standards of behavior. Standards apply to all Torch Club members throughout the conference.*

All Torch Club members who will be attending the Summit must sign this Behavior Code in the spaces below. Advisors will review and periodically reinforce these behavior standards with their Torch Club members.

- Torch Club members **must attend** all sessions at all times and remain in the sessions from beginning to end.
- Torch Club members must show courtesy and respect for others at all times.
- Torch Club members are not permitted to bring portable electronics, including iPads, iPods, iPhones, MP3 players and video games into sessions. If a Torch Club member must bring a cell phone, it must be turned off or silenced in all general and break-out sessions.
- Torch Club members must dress appropriately at all times. There should be no T-shirts or other clothing with profanity, inappropriate imagery or sexual or racial innuendo. Pants should not sag to expose undergarments. See-through or revealing clothing should not be worn. No hats, do-rags or scarves are allowed at the conference. Attire that exposes the midriff or that has spaghetti straps is inappropriate at the Summit.
- Torch Club members must be between the ages of 11-13 to attend the Summit.
- Absolutely no drugs, tobacco, alcohol or sexual activity will be tolerated at the Summit.
- Torch Club members must wear name tags and display them so they are easy to read at all times during the Summit.
- Torch Club members must listen to and respect their advisor, any other advisor or any Boys & Girls Club staff member who may address them at the Summit.

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*1 Positive Place*  
*Shelton, CT 06484*  
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# BEHAVIOR CODE FOR MEMBERS

2017 NORTHEAST REGIONAL

TORCH CLUB SUMMIT

SHELTON, CONNECTICUT

APRIL 22-23, 2017

Club Name: \_\_\_\_\_

Unit Name (if applicable): \_\_\_\_\_

I, a Torch Club member, agree to abide by the above Code of Behavior while at the Northeast Regional Torch Club Summit:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
Signature of CPO

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Torch Club Advisor(s)

\_\_\_\_\_  
Date

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# PARENTAL PERMISSION FORM

2017 NORTHEAST REGIONAL

TORCH CLUB SUMMIT

SHELTON, CONNECTICUT

APRIL 22-23, 2017

Club Name: \_\_\_\_\_

Unit Name (if applicable): \_\_\_\_\_

I hereby consent and have given permission for my child \_\_\_\_\_ to participate in any and all events and activities related to the 2017 Northeast Regional Torch Club Summit, held at the Boys & Girls Club of the Lower Naugatuck Valley, Laviestes Unit in Shelton, CT on April 22-23, 2017. And I hereby release and agree to hold harmless and indemnify Boys & Girls Clubs of America or its affiliated Clubs, including the Boys & Girls Club of the Lower Naugatuck Valley and my child's home Club listed above, from any and all claims, actions or damages without any limitation whatsoever, whether consisting of personal injury, property damages, or death that does or may result through his/her participating in the 2017 Northeast Regional Torch Club Summit, including any and all events and activities at the Boys & Girls Club of the Lower Naugatuck Valley and any and all events and activities which might occur offsite.

I hereby consent to the reproduction, publication and use of photographs, audio recording and/or video footage taken of my child, \_\_\_\_\_ by the Boys & Girls Clubs of America or its affiliated Clubs, including Boys & Girls Club of the Lower Naugatuck Valley and my child's home Club listed above. These photographs, audio and/or video footage may be used for advertising, educational and/or publicity purposes in any and all publications, web sites, advertisements and publicity materials, without limitation or reservation, as deemed appropriate by the organization. I also consent to any testimony or text written about my child named above which may accompany said photographs, audio or video or which may stand alone in any and all publications, advertisements and publicity materials without limitation or reservation, as deemed appropriate by the organization.

\_\_\_\_\_  
Name of Parent/Guardian (please print)

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

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# EMERGENCY MEDICAL PERMISSION

2017 NORTHEAST REGIONAL

TORCH CLUB SUMMIT

SHELTON, CONNECTICUT

APRIL 22-23, 2017

Club Name: \_\_\_\_\_

Unit Name (if applicable): \_\_\_\_\_

*All Boys & Girls Clubs sending Torch Club members to the Northeast Regional Torch Club Summit are required to secure a permission form (which includes permission to provide medical care in case of an emergency) signed by the parent/guardian of each Torch Club member attending the Summit.*

My child \_\_\_\_\_ has my permission to attend the 2017 Northeast Regional Torch Club Summit held at the Boys & Girls Club of the Lower Naugatuck Valley, Laviates Unit, in Shelton, CT. I understand that they will be traveling with a delegation from the Boys & Girls Club named above and will be at the Summit on April 22-23, 2017.

## Emergency Medical Permission

**First Aid:** I authorize the staff from my child's home Club, or a CPR/First Aid certified representative from the Boys & Girls Club of the Lower Naugatuck Valley, to administer treatment to my child.

**Hospital:** I authorize the staff from my child's home Club, or a representative from the Boys & Girls Club of the Lower Naugatuck Valley, transport my child to the nearest hospital and authorize treatment by the doctor on call.

**Doctor:** I authorize staff from my child's home Club, or a representative from the Boys & Girls Club of the Lower Naugatuck Valley, to contact \_\_\_\_\_, M.D. at phone # \_\_\_\_\_ in a medical emergency regarding my child.

**Are there any conditions which should be brought to our attention regarding the health of your child?**

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\_\_\_\_\_  
Name of Parent/Guardian (please print)

(\_\_\_\_) \_\_\_\_-\_\_\_\_  
Best Contact Number

☐ Cell

☐ Home

☐ Work

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

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# TORCH CLUB AWARDS NOMINATION FORM

2017 NORTHEAST REGIONAL

TORCH CLUB SUMMIT

SHELTON, CONNECTICUT

APRIL 22-23, 2017

Club Name: \_\_\_\_\_

Unit Name (if applicable): \_\_\_\_\_

**NOMINATIONS MUST BE RETURNED BY FRIDAY, APRIL 7<sup>TH</sup>, 2017**

*Please note: Only one entry per category for each Club/Unit is permitted.*

*Please type or print neatly for the entire form.*

Project Title: \_\_\_\_\_

**Award Category or Nomination:**

- ☐ Service to Club and Community
- ☐ Education
- ☐ Health and Fitness
- ☐ Social Recreation
- ☐ National Project: Linking Hearts and Hands

Torch Club Name: \_\_\_\_\_

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

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

Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ x \_\_\_\_\_ Email: \_\_\_\_\_

Torch Club Advisor: \_\_\_\_\_ Signature: \_\_\_\_\_

Advisor's Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ x \_\_\_\_\_ E-mail: \_\_\_\_\_

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# TORCH CLUB AWARDS NOMINATION FORM

2017 NORTHEAST REGIONAL

TORCH CLUB SUMMIT

SHELTON, CONNECTICUT

APRIL 22-23, 2017

Club Name: \_\_\_\_\_

Unit Name (if applicable): \_\_\_\_\_

**NOMINATIONS MUST BE RETURNED BY FRIDAY, APRIL 7<sup>TH</sup>, 2017**

*Note: Be sure to describe all aspects of your project clearly and concisely, and give careful consideration to the questions. As needed, you may attach additional sheets of paper to fully answer the following questions. Supporting documents are allowed and may include, but are not limited to: Copies of newspaper articles or press releases, photographs of Torch Club members in action and examples of completed projects (where applicable).*

**1. Briefly describe your Torch Club's project and its purpose.**

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**2. Describe the aspects of your Torch Club's project which show creative and imaginative thought and planning.**

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**3. Describe how your Torch Club's project meets the needs of your members, your Club and your community.**

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**4. Describe how your Torch Club's members demonstrated character and leadership in the planning and implementation of your project.**

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\_\_\_\_\_  
Name of Torch Club President

\_\_\_\_\_  
Signature of Torch Club President

\_\_\_\_\_  
Date

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# ADVISOR OF THE YEAR NOMINATION FORM

2017 NORTHEAST REGIONAL

TORCH CLUB SUMMIT

SHELTON, CONNECTICUT

APRIL 22-23, 2017

Club Name: \_\_\_\_\_

Unit Name (if applicable): \_\_\_\_\_

**NOMINATIONS MUST BE RETURNED BY FRIDAY, APRIL 7<sup>TH</sup>, 2017**

*Please Note:* Presence at the 2017 Northeast Regional Torch Club Summit is required for all nominees. Torch Club members and the Club's CPO must complete the nomination form. Signatures of the Torch Club President and the Club's Chief Professional Officer are required.

*Please type or print:*

Nominee Name: \_\_\_\_\_

Torch Club Name: \_\_\_\_\_

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

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

Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ x \_\_\_\_ Email: \_\_\_\_\_

1. How long has s/he been a Torch Club advisor? \_\_\_\_\_

2. How has your advisor helped the members of your Torch Club develop a sense of pride within your group?

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3. Describe a time when your Torch Club Advisor involved your Club in the planning and implementation of an activity. How did your advisor ensure every member had a voice and an opportunity to be heard?

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# ADVISOR OF THE YEAR NOMINATION FORM

2017 NORTHEAST REGIONAL

TORCH CLUB SUMMIT

SHELTON, CONNECTICUT

APRIL 22-23, 2017

Club Name: \_\_\_\_\_

Unit Name (if applicable): \_\_\_\_\_

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4. What has your advisor done to encourage your Torch Club to reach out to, engage with and develop a sense of unity within your Club and your community?

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5. If you could compare your advisor to any famous person, to whom would you compare him/her and why? (Please be specific).

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6. In 50 words or less, what has your advisor accomplished through Torch Club?

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\_\_\_\_\_  
Name of Torch Club President

\_\_\_\_\_  
Signature of Torch Club President

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Club CPO

\_\_\_\_\_  
Signature of Club CPO

\_\_\_\_\_  
Date

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