



Big Friend Little Friend of the Mitchell Area
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Mitchell, SD 57301
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LITTLE FRIEND APPLICATION

Name _____ Birthdate _____
Street _____ City _____ Zip _____
Gender M F Age _____ School _____ Grade _____
Child cell _____ Religion _____

FAMILY INFORMATION:

Parent/Guardian #1 Name _____ Relationship to child _____
Employer/Occupation _____ Work phone _____
Email _____ Cell phone _____

Parent/Guardian #2 Name _____ Relationship to child _____
Employer/Occupation _____ Work phone _____
Email _____ Cell phone _____

Brothers and Sisters

Name(s)

Age(s)

I feel my child could benefit from having a Big Friend in the following ways:

Communication Preferences:

I prefer to communicate via (mark all that apply): Call Text Email

The best time to contact me is: _____

GRANT INFORMATION

The information from the following questions will be used to apply for grants. Grants help fund our program. Answering the following questions is optional and is not a requirement of the program. This information is about the Little Friend and his/her immediate family and will be confidential.

Does the child live with a single parent? _____ mother _____ father

Does the child live with a legal guardian? _____ relation _____

Does the child have a parent or legal guardian in the prison system? Y N

Does your family qualify for:

Free or reduced lunches? Y N

Housing assistance? Y N

EBT? Y N

Household Annual Income (total income of the adults the child lives with)

____ <\$10,000 ____ \$10,001-\$24,999 ____ \$25,000-\$49,999 ____ \$50,000-\$74,999 ____ \$75,000-\$99,999
____ \$100,000-\$149,999 ____ >\$150,000

Is there a parent or legal guardian disabled, or on disability? Y N

If yes, please explain _____

Please circle your ethnicity: African American American Indian/Native American Asian/Pacific Islander
Caucasian Hispanic/Latino Multi-racial Other: _____

CONFIDENTIALITY POLICY

It is the policy of Big Friend Little Friend of the Mitchell Area (BFLFMA) to protect the confidentiality of its Bigs, Littles and their families. The BFLFMA staff will only share information about Bigs, Littles and their families with BFLFMA board of directors, student interns, or work-study students. In addition, Mentors are required to keep information regarding their Little and his/her family confidential. All files are considered the property of BFLFMA and are not available for review by parents/guardians, Littles, young moms or volunteers.

LIMITS OF CONFIDENTIALITY

1. Information will be released to other individuals or organizations only with a signed release form from the mentor, parent/guardian or young mom.
2. Information shall only be provided to law enforcement officials or the court upon delivery of a valid subpoena.
3. State law mandates that suspected child abuse or neglect be reported to the Department of Social Services. Mentors and/or BFLFMA staff will report any suspected abuse or neglect of a minor.

I have read and understand the Big Friend Little Friend of the Mitchell Area confidentiality policy.

Signature

Date

PARENT PERMISSION

I, _____, do hereby give my consent to Big Friend Little Friend, its Board of Directors, its staff, a Big Friend volunteer, or any agency affiliated directly or indirectly to Big Friend Little Friend of the Mitchell Area the right and permission for my child to:

1. Attend and participate in activities with a Big Friend volunteer.
2. Attend and participate in scheduled group activities provided by Big Friend Little Friend of the Mitchell Area
3. At their discretion, obtain MEDICAL/HOSPITAL CARE, at the parent/guardians expense, in the event that I, the parent/guardian cannot be contacted during any type of medical emergency.

I hereby grant to Big Friend Little Friend of the Mitchell Area the right to use images and names as they may desire, in all media and in all forms including but not limited to, publications, any televised photography and recordings, online and Social Media sites.

When determining whether a child will be considered for a match, the following information will be shared with a volunteer: child's first name, age, race, religious preference, description of the child's family and home environment, summary of child's interests, and evaluation of child's needs.

I understand and agree that Big Friend Little Friend of the Mitchell area is not obligated to match my child with a volunteer. I further understand and agree that Big Friend Little Friend makes no guarantee or other commitment as to impact (emotional, psychological, spiritual, academic or physical) a volunteer may have on my child.

I hereby agree to hold free of liability the Big Friend Little Friend staff, volunteers, and all agents and representatives, thereof, in the event of any results or developments occurring as part of their efforts on my behalf.

I do hereby release Big Friend Little Friend of the Mitchell Area, its successors, agents, volunteers, and assigns from any responsibility for injury, illness, or accidents that may occur to participants. I exonerate them completely from any damages that the participant may cause to any person(s) or property while in their charge.

I have read the forgoing, which I understand to be an AUTHORIZATION and also a RELEASE. I understand it fully and incur all responsibility as the parent/guardian.

Signature _____ Date _____

LITTLE ACTIVITIES and INTERESTS

Child's Name _____

Place an X next to the things you would like to do with a Big Friend.

- Spectator Sports: DWU Sports, MHS Sports,
Hockey, Soccer, Amateur Baseball
- Football
- Baseball
- Softball
- Basketball
- Track
- Soccer
- Wrestling
- Tennis
- Volleyball
- Golf/Mini-golf
- Ping Pong
- Roller-skating
- Roller-blading
- Bowling
- Swimming
- Auto Racing
- Archery
- Frisbee/Frisbee golf
- Martial Arts
- Snow Skiing
- Cross Country Skiing
- Ice Skating
- Ice Fishing
- Snow Tubing
- Snow Board
- Hockey
- Bike Riding
- Walking/Running
- Hiking
- Camping
- Fishing
- Hunting
- Picnics
- Boating
- Canoeing
- Water Sports
- Horseback Riding
- Animal Care
- Gardening
- Go-Carts
- Woodworking
- Arts & Crafts
- Auto Repair
- Photography
- Sewing/Needle work
- Computers/Electronics

- Music
- Movies
- Museums
- Plays
- Concerts
- Dancing
- Collecting Items: What: _____
- Reading
- Library
- Board Games
- Video Games
- Musical Instruments: Which One: _____
- Cooking
- Baking
- Astronomy
- Shopping
- Skate Boarding
- 4-Wheeling
- Geocaching

Others not listed:

