



2020-2021 GENERAL MEMBERSHIP ENROLLMENT INSTRUCTIONS

THANKs Teen Board is an organization of high school students who are committed to helping abused and neglected children by providing service through Community Partners of Dallas. Members are educated on the inner workings of Child Protective Services, as well as related educational topics that affect the children and families in our community. Being an active member of THANKs allows you the opportunity to learn about and help abused and neglected children. It's also a fun way to learn about service, fundraising and more! The training you receive will last a lifetime. THANKs offers 7 general meetings a year and many service opportunities. We ask that members attend at least 3 general meetings and 2 service projects.

To enroll, please make sure that you have enclosed the following items:

- Signed copy of Enrollment Form
- Signed copy of Policy & Procedure for Reporting Child Abuse & Confidentiality Agreement
- \$40 check made payable to Community Partners of Dallas. These dues will establish the operating budget for THANKs and will also provide a t-shirt. These dues are non-refundable. Financial Aid Scholarships are available based on need - contact Jennifer for more information.

Return all enrollment materials to:

Community Partners of Dallas
Attn: Jennifer Doggett
7950 Elmbrook Drive
Dallas, TX 75247

You will receive confirmation of your enrollment via email. For questions or more information, please contact Jennifer Doggett at 214-624-7559 or

jennifer@cpdtx.org

www.CommunityPartnersDallas.org

The mission of Community Partners of Dallas is to provide what abused children urgently need today to thrive tomorrow.



communitypartnersofdallas

THANKs

Teens Helping Abused & Neglected Kids

GENERAL MEMBERSHIP ENROLLMENT FORM

THANKs Member Information

First & Last Name: _____

Address: _____

Birthday: _____ Grade in 2020-2021 School Year: _____ School: _____

Cell Phone: _____ Email: _____

_____ I am renewing my THANKs membership _____ I am a new member to THANKs

Referred by (if applicable): _____

Parent's Contact / Emergency Information (* Indicates Required Field)

*First & Last Name: _____

Check Here if Address is Same as Student's

Address: _____

*Cell Phone: _____ *Email: _____

Company & Occupation: _____

Confidentiality Agreement

I PROMISE THAT I WILL HOLD IN CONFIDENCE ALL PERTINENT INFORMATION RELATING TO THE INDIVIDUAL CASES AND CLIENTS AT CHILD PROTECTIVE SERVICES IN DALLAS COUNTY AND COMMUNITY PARTNERS OF DALLAS. I WILL NOT VIOLATE THE CONFIDENTIAL RELATIONSHIP BETWEEN CPS, CPD, ITS VOLUNTEERS AND RELATED AGENCIES. I WILL NOT REMOVE ANY WRITTEN INFORMATION OR RECORDS WITHOUT EXPRESSED PERMISSION FROM THE PRESIDENT & CEO OR DESIGNATED PROFESSIONAL STAFF. I ACCEPT FULL RESPONSIBILITY FOR MAINTAINING THE CONFIDENTIAL AND PRIVATE NATURE OF ALL RECORDS AND INFORMATION. I UNDERSTAND THAT I AM PERSONALLY RESPONSIBLE AND LIABLE FOR ANY VIOLATION OF THIS AGREEMENT.

Photo Release

I GIVE MY PERMISSION TO USE MY LIKENESS IN ANY PUBLIC RELATIONS MATERIALS FOR THE PROMOTION OF COMMUNITY PARTNERS OF DALLAS.

General Release

I AGREE TO, AND DO HEREBY, KNOWINGLY RELEASE, ABSOLVE, AND INDEMNIFY, AND HOLD HARMLESS, CPS COMMUNITY PARTNERS INC., ITS OFFICIALS AND EMPLOYEES, (A.K.A. COMMUNITY PARTNERS OF DALLAS) AND ITS OFFICERS, DIRECTORS AND VOLUNTEERS, BOTH JOINTLY AND SEVERALLY, FROM ALL CLAIMS THAT MIGHT RESULT FROM ANY ACCIDENT, PERSONAL INJURY, ILLNESS AND/OR DEATH TO THE UNDERSIGNED, OR FROM ANY DAMAGE TO OR LOSS OF ANY PROPERTY OF THE UNDERSIGNED, WHETHER OR NOT SUCH ACCIDENT, PERSONAL INJURY, ILLNESS, DEATH, DAMAGE OR LOSS ARISES FROM THE SOLE AND/OR CONTRIBUTORY NEGLIGENCE OF ANY PERSON OR ENTITY RELEASED HEREIN.

Member Signature for all three items above: _____ Date: _____

Parent Signature for all three above items: _____ Date: _____



Policy & Procedure for Reporting Child Abuse & Confidentiality Agreement

Child abuse and neglect are against the law in Texas and so is the failure to report them. If you suspect a child has been abused or mistreated, you are required to report it to the Texas Department of Family and Protective Services or to a law enforcement agency. You must make a report within 48 hours of the time you suspect the child may have been abused or neglected.

If you suspect a child has been abused or neglected, or if you have questions about whether the concern you have constitutes abuse or neglect, call the 24-hour toll free Abuse/Neglect Hotline at 1-800-252-5400. This call may be anonymous if you wish. If it is an emergency situation, call 911.

I promise that I will hold in confidence all pertinent information relating to the individual cases and clients at Child Protective Services, Dallas. I will not violate the confidential relationship between Child Protective Services, Dallas, its volunteers, and participating and related agencies. I will not remove any written information or records from the Child Protective Services, Dallas building without expressed permission from the President & CEO of Community Partners of Dallas or designated professional staff.

I accept full responsibility for maintaining the confidential and private nature of all records and information and **I promise** to immediately report any suspicions of child abuse and neglect to the proper authorities. I understand that I am personally responsible and liable for any violation of this agreement.

Member Signature for all three items above: _____ Date: _____

Parent Signature for all three above items: _____ Date: _____