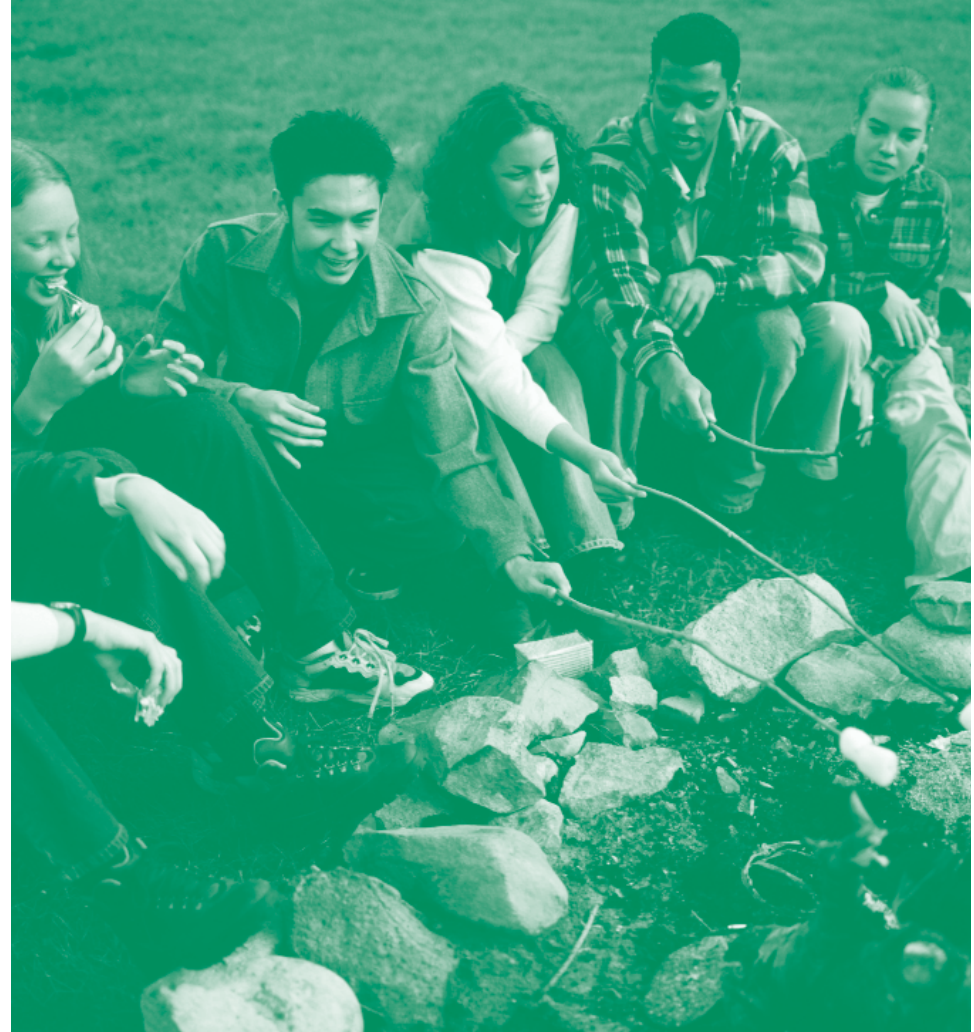




Youth Supervision Guide



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Benevolent and Protective Order of Elks

MISSION STATEMENT

It is the intent of the Elks to provide activities for our youth in a safe, structured environment and facilitate positive growth without drugs and adverse, destructive influences. The following policy is intended to provide information to local Lodges to protect our youth when interacting in Elks activities with other youth, leaders, volunteers and parents. We must be ever vigilant in the safety of our young people, aid in character development, recognize their many contributions and encourage them in maturing into tomorrow's citizens and leaders.

STATEMENT OF PHILOSOPHY

Ongoing relationships with caring adults are one of the basic needs of today's youth. These relationships provide youth with guidance, support and a connection to the skills they need to succeed as an adult. By encouraging local Lodges in participating in youth activity programs youth have a great opportunity to connect with Elks mentors.

The Elks are proud of our involvement with the youth of our communities. The philosophy of sponsoring beneficial activities for education and enjoyment is an objective local Lodges should consider and implement. These guidelines intend to aid in this activity.

The Grand Lodge will attempt to assist local Lodges in the establishment of such programs but will not be responsible for monitoring or controlling such programs.

POLICY IMPLEMENTATION

It is recommended that the Exalted Ruler appoint a Committee of his choosing for the implementation and oversight of this policy. He should identify the name of the Member or Members appointed to receive and investigate complaints. The committee would formulate procedures with respect to handling complaints.

All allegations of impropriety that are brought to the attention of the Committee will be investigated. The Committee will report their findings to the Exalted Ruler and the Elks Insurance Department. It is intended that the privacy of the persons involved will be protected.

It is recommended that all Officers and committee volunteers review this policy and sign an acknowledgement that they have read and received a copy. (*See Exhibit A*)

SUPERVISION AND CARE OF YOUTH DURING AN ELK ACTIVITY

The following is a list of recommended procedures each Lodge should follow.

TWO ADULT RULE

During an Elk sponsored youth activity, more than one adult must be present with a youth or a group of youths at all times during youth activities. For small group activities where one adult supervises one group, two or more groups are to meet in the sight and sound of each other.

FOUR-YEAR-OLDER RULE

The rule should apply at all youth activities. Adults supervising youth will be at least four years older than the oldest youth present. When college-age persons are participating in an activity with youth, they will be paired with another adult when they are with youth.

HANDS OFF RULE

Touching is prohibited either between the youth or between them and the Advisors. A handshake would be the only exception.

ALL NIGHT EVENTS

Adults and youth will not share the motel/hotel rooms unless the adult is a parent of the youth with whom they share the room. Use of dorm rooms with a combination of youth and adults is acceptable when all persons sharing the room are the same gender.

ALL NIGHT EVENTS WHEN MALE AND FEMALE ARE BOTH INCLUDED

There will be separate sleeping area for males and for females for all overnight sponsored youth activities.

SHOWER TIMES

When needed, separate shower times for the youth and adults shall be designated to prevent adults and youth showering together (example: in facilities such as the YMCA with open shower areas).

ADULT/YOUTH RATIO

The adult/youth ratio recommended at ELK activities will be at least 1 to 5 for senior high youth and at least 1 to 3 for junior high youth.

MIXED YOUTH GROUPS

When an ELK activity has both male and female youth members, there must be both male and female adults accompanying youth at the activity.

REQUIRED ADULTS AT WORK SITES

There should always be at least two adults at each work or activity site with youth. For small activities where one adult supervises one group, two or more groups are to meet in the sight and sound of each other.

MEDICAL FORMS

All youth participating in the Elks “Antlers” program must have a completed medical release form and completed permission forms. *(See Exhibit B)*

TRAVELING TO ANOTHER LOCATION

When traveling to another location for the activity, no team member will be allowed to be alone with an adult from the host activity. This includes host officers, activity members, or homeowners. Likewise an adult team member is not allowed to be alone with a youth from the host activity.

LEADERS

The local Lodge Committee will endeavor to review proposed programs to be conducted by the Lodge and determine training or experience needed by volunteers to conduct such programs in a safe and efficient manner. In all instances, the local Lodge must conform to any local, state or Federal laws, policies or procedures applicable to such activities including any requirements for background checks.

TRAINING

Training of leaders can be the result of the study of other organizations’ protection policies and implantation of key elements of their policies. Many protection policies are found on line and provide a wealth of information. One such policy can be accessed through the www.Elks.org web site under Elks Youth Activities and Scouting.

PARENT AUTHORIZATION

Written parent/guardian authorization can override the above listed rules. For example, a guardian can give permission for a certain youth to ride a specified distance with a specified adult when traveling to an ELK activity. If there is more than one guardian, all signatures are required. *(See Exhibit B)*

INVESTIGATION AND REPORTING OF INCIDENTS

Incidents observed or reported involving allegations of inappropriate behavior by officers, volunteers or other participants should be reported to the appropriate official of the local Lodge if this person is not alleged to be the perpetrator of the inappropriate behavior. Such allegations should be investigated to establish basic fact. Such circumstances should be discussed with appropriate legal advisors and/or the Elks Insurance Department.

In this process, the protection of the children or youth must be paramount and appropriate. Privacy must be maintained.

TALKING TO THE MEDIA

Child abuse incidents are newsworthy to the public and the media. To the extent possible, preliminary allegations or facts should not be provided. If it is necessary to respond, the response should be made by a designated person who has received legal advice.

INSTRUCTIONS FOR USING THIS GUIDE

Each volunteer should have a copy of the *Youth Supervision Guide*. The volunteer must sign the Acknowledgement form (Exhibit A) and return it to the lodge.

Each participating youth’s parent must complete the *Parental Consent and Medical Authorization* form (Exhibit B) and return the form to the lodge.

The Grand Lodge has authorized Subordinate Lodges to make as many copies of Exhibits A & B as they may need.

(Exhibit A)
(Lodge Letterhead)

(Exhibit B)
(Name of Lodge and Address)

ACKNOWLEDGEMENT OF YOUTH SUPERVISION GUIDE

PARENTAL CONSENT AND MEDICAL AUTHORIZATION

Date _____

Name of child/youth: _____ Grade: _____ Age: _____

I am a volunteer of _____ Lodge No. _____
of the Benevolent and Protective Order of Elks. I acknowledge receipt of the
Youth Supervision Guide as adopted by the Lodge.

Address: _____
Street/Apt Number City Zip Code

Daytime Phone Number: (____) _____ Evening Phone Number: (____) _____

Printed Name

As the parent (or legal guardian) of: _____
Child/Youth's Name

Signature

I understand that my child/youth will be participating in a number of activities for
calendar year _____ (Or specific date), which carry with them a certain degree
of risk. Some of these activities are swimming, boating, hiking, camping, field trips,
sports, Lodge functions and other activities, which the Lodge may offer. I consent
for my child to participate in these activities.

Title if any

Please indicate any restrictions on your child's/youth's activities:

_____ I represent that my child/youth is physically fit and has the necessary
skills to safely participate in these activities.

_____ I also understand and give consent for my child/youth to travel to and
from these events in transportation provided by volunteer drivers.

MEDICAL TREATMENT AUTHORIZATION

It is my understanding that the Lodge will attempt to notify me in case of a medical
emergency involving my child/youth. If the Lodge cannot reach me, then I authorize
the Lodge to hire a doctor or health-care professional, and I give my permission to the
doctor or other health-care professional, to provide the medical services he or she may
deem necessary. I will pay for any medical expenses so incurred.

I will notify the Lodge if I feel there are any health considerations that would prevent
my child/youth's participation in any of the activities listed above.

Health considerations or medical conditions: _____

Insurance Company: _____ Policy/Group # _____

Signature of Parent or Guardian _____ **Date** _____

NOTARY DATE SEAL