



**BOYS & GIRLS CLUB
OF LAKE SHORE**

2026 - 2027 School Year Application

CHILD INFORMATION

First Name	_____	Last Name	_____
Suffix	_____	Informal Name	_____
Foster Care	Circle YES OR NO	Racial/Ethnic Identity	_____
Gender	_____	Birthdate	_____
School Name	_____	Grade	_____
Address	_____	City	_____
State	_____	Zip	_____

ALLERGIES

Does your child have any known allergies:	Circle YES OR NO	If so, explain:	_____
Does the child use an EpiPen?	Circle YES OR NO		

MEDICAL INFORMATION

Diagnosed Medical Conditions	Circle YES OR NO	If so, explain:	_____
Other Physical, Mental or Medical Limitations	Circle YES OR NO	If so, explain:	_____
Does the Member Receive Additional Support in School/Community?	Circle YES OR NO	If so, explain:	_____
Does the Member use an Inhaler?	Circle YES OR NO	Does the Member Self-Administer Medication?	Circle YES OR NO
Does the Member use Insulin?	Circle YES OR NO		

INSURANCE INFORMATION

Insurance Carrier	_____	Member/Policy Number	_____
Group Number	_____		

PRIMARY GUARDIAN CONTACT INFORMATION

First Name	_____	Last Name	_____
Relationship to Child	_____	Mobile Phone	_____
Alternate Phone	_____	Email	_____

ADDITIONAL GUARDIAN CONTACT INFORMATION

First Name	_____	Last Name	_____
Relationship to Child	_____	Mobile Phone	_____
Alternate Phone	_____	Email Address	_____

EMERGENCY CONTACTS

	EMERGENCY CONTACT 1		EMERGENCY CONTACT 2
First Name	_____	First Name	_____
Last Name	_____	Last Name	_____
Mobile Phone	_____	Mobile Phone	_____
Alternate Phone	_____	Alternate Phone	_____
Relationship	_____	Relationship	_____
Authorized for Pickup	Circle YES OR NO	Authorized for Pickup	Circle YES OR NO

HOUSEHOLD SUPPORT INFORMATION

Primary Language Spoken in the Home	_____	Member Lives With:	_____
Number of Adults in Household	_____	Number of Youth in Household	_____
Other Relatives in Household	Circle YES OR NO	If so, explain:	_____
Approx Annual Household Income	_____		

NOT AUTHORIZED TO PICK UP
(list any individuals who are not authorized to pick up your child)

First Name	_____	First Name	_____
Last Name	_____	Last Name	_____
Relationship	_____	Relationship	_____

Initial Here	Disclaimer & Waivers
	<p align="center">Disclaimer</p> <p>I, do hereby give my son/daughter permission to attend and participate in activities sponsored by the Boys and Girls Club of Lake Shore. I hereby release the Boys and Girls Club of Lake Shore, its employees, associates, and contributors from liability from any injury, loss or theft incurred by my child while participating. Furthermore, I hereby authorize medical examination and emergency treatment for my child by a qualified, licensed physician in the event of an accident. I further understand that the Boys and Girls Club of Lake Shore has an "open door" policy for all youth, which means that my child may come and go at will. My signature below indicates that I completely understand the above statement.</p>
	<p align="center">Administering First Aid Products</p> <p>In the situation of the occasional scrape, bee sting, sunburn or prevention of sunburns we sometimes need to administer basic first aid. This would include using products like antibacterial cream, sunscreen, aloe/burn cream, anti-itch cream, bee sting ointment, alcohol wipes and hydrogen peroxide, the situation of the occasional scrape, bee sting, sunburn or prevention of sunburns we sometimes need to administer basic first aid.</p>
	<p align="center">Code of Conduct for Members</p> <ul style="list-style-type: none"> • I WILL be respectful to staff, equipment, and other members, including using polite language. <ul style="list-style-type: none"> • I WILL talk to a staff person if I have a question or problem. • I WILL remember the "Golden Rule" and treat others as I would like to be treated.
	<p align="center">Text Messaging Waiver</p> <p>I certify that I am the subscriber to the provided cellular number. To stay informed and receive the best service, I authorize the Boys & Girls Club and its representatives and agents to contact me regarding my member at any current and future numbers that I provide for my cellular telephone using automatic dialing systems, artificial or prerecorded messages, and/or SMS text messages. I understand that standard message and data rates may be charged by my service provider(s).</p>
	<p align="center">Walker Policy</p> <p>Parent/Guardian must call the clubhouse and advise to staff that they are releasing the child and allowing them to walk home. A note may also be sent with the child. The note must include the time you would like your child to start walking. Phone calls and/or notes from Emergency Contacts will not be accepted.</p>
	<p align="center">Photo Release</p> <p>I agree my child's picture may be used in Boys & Girls Club publications, and marketing materials</p>
	<p align="center">Safety</p> <p>At the Boys & Girls Club of Eden-Lake Shore, Child Safety is always our number one priority. Ensuring child safety is fundamental to the mission of our organization I have read and understand the Boys & Girls of Lake Shore Safety Policies found at https://bgcedenlakeshore.org/safety-policy</p>
	<p align="center">Holiday Adoption</p> <p>At holiday time The Boys & Girls Club is fortunate to have donors adopt families who are in need. Check this box if your family would be interested in becoming adopted if the opportunity presents itself. ALL information will remain confidential.</p>

(Signature of Parent)

Date

(Print Name)