

**(FOR OFFICE USE ONLY)**

CLASS: \_\_\_\_\_ NUMBER: \_\_\_\_\_ DATE JOINED: \_\_\_\_\_

NEW or RENEWAL

PAID or WORKED

Birth Verification: YES or NO

STAFF: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender: Male Female Age: \_\_\_\_\_ Birth date: \_\_\_\_\_

Ethnicity: African American Asian Caucasian Hispanic Native American Other

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

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

Telephone: \_\_\_\_\_ PARENT Email: \_\_\_\_\_

Current School: \_\_\_\_\_ Current Grade: \_\_\_\_\_

In the school lunch program, is your child eligible for one of the following? (Circle one): Free Reduced Not-eligible

Will child attend Club (Circle one): Year Round School Year Only Summer Only Athletics Only

**CONTACT INFORMATION:**

**Parent/Guardian 1**

**Parent/Guardian 2**

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

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

Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Type: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Type: \_\_\_\_\_

Phone 2: \_\_\_\_\_ Type: \_\_\_\_\_

Phone 2: \_\_\_\_\_ Type: \_\_\_\_\_

**Emergency Contact 1**

**Emergency Contact 2**

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

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

Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Type: \_\_\_\_\_

Phone 1: \_\_\_\_\_ Type: \_\_\_\_\_

Phone 2: \_\_\_\_\_ Type: \_\_\_\_\_

Phone 2: \_\_\_\_\_ Type: \_\_\_\_\_

**MEDICAL INFORMATION:**

Family Doctor's Name: \_\_\_\_\_ Doctor's Phone: \_\_\_\_\_

Does your family have health and/or accident insurance (Circle one): Yes No

Does child have any serious health problems (Circle one): Yes No

If yes, please explain \_\_\_\_\_

Does child currently take any medications of which we should be aware of? (Circle one): Yes No

If yes, please list \_\_\_\_\_

**GENERAL:**

Do you understand the insurance disclaimer and permission statement on back of application (Circle one): Yes No

My child may participate in all Boys & Girls Clubs activities in or adjacent to the Club building (Circle one): Yes No

**HOUSEHOLD:**

Annual Gross Income (Circle one): 0-\$14,999 \$15,000-\$19,999 \$20,000-\$29,999 \$30,000-\$39,999 Over \$40,000

Does child live with (Circle one): Both Parents Mom Step Mom Dad Step Dad Other: \_\_\_\_\_

Total number living in household: \_\_\_\_\_ Is this a Single Parent Household (Circle one): Yes No

Is either parent Active Military, Reserves, National Guard, or Coast Guard (Circle one): Yes No

**Waiver on back MUST be read and signed before membership card will be issued.**

**PLEASE READ AND SIGN BACK**

## **Insurance Disclaimer and Permission Statement**

In consideration of my child's membership and participation in the Boys & Girls Clubs of Burkburnett (a.k.a. the "Club"), I, as parent/guardian of named minor, do hereby release the Club from all liability to me, my child, and my child's personal representative, assigns and heirs for all claims and damages which my child or I may have against the Club and/or its sponsors resulting from participation in or connections to a Club-related activity. I hereby authorize the Club, as my agent, to secure medical treatment as is deemed necessary and will, on behalf of said minor, assume and pay all expenses associated with such treatments in the event of accident, illness or other incapacity. **I will ensure that my child will comply with the behavioral rules listed below. I acknowledge that failure by my child to follow Club rules could result in his/her suspension from ALL Clubs and programs. I permit the Club to utilize photographs of my child taken of his/her involvement in Club programs for public relations purposes and hereby waive all rights of compensation for said use. I understand that the Club is not a licensed day care provider and that day care licensing does not regulate the Club's operation. I also understand the Club is not responsible for the time or manner in which my child arrives or leaves the Club property. I additionally understand that the Club is not responsible for lost or stolen items/personal belongings. I realize it is my responsibility to be familiar with Club program hours and make arrangements for my child to be picked up by closing time. If my child is not picked up on time, I understand a late fee will be charged to me.**

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I agree to take care of my Club and its property. I will abide by the Club's rules and expectations at all times.

Child's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **CLUB RULES and EXPECTATIONS**

1. Have fun in the club
2. Participate in programs and activities
3. Bring your Boys & Girls Club card and mark your number
4. Take care of the equipment and Club building
5. Keep your hands and feet to yourself
6. Call other members by their name
7. Follow the directions of all staff
8. Stay in the Club building
9. Walk while in the Club building
10. You may run only in the gym
11. Be courteous and respectful in your behavior
12. Be courteous and respectful when you are talking
13. Dress appropriately