



BOYS & GIRLS CLUB OF LENAWEE

517-266-9775

340 E. Church Street, STE A

Adrian, MI 49221

OFFICE USE ONLY

Membership Date _____

Expiration Date _____

Club I.D. Number _____

MEMBERSHIP APPLICATION

PLEASE PRINT

Child's Name: _____

Address: _____

City, State, Zip: _____

Age: _____ Birth Date: _____
Month Day Year

Proof of Age will be required for all new members.

Home Phone: _____

School Attending: _____

Father/Guardian's Name: _____

Cell Phone: _____

Place of Employment: _____

Work Phone: _____

Mother/Guardian's Name: _____

Cell Phone: _____

Place of Employment: _____

Work Phone: _____

EMERGENCY CONTACT

MUST be filled out prior to membership

Name: _____

Address: _____

Phone: _____

OTHER NECESSARY INFORMATION

Any known medical conditions, allergies, behavioral needs, etc.

GENDER

- Male
- Female

CURRENT GRADE

2016-17 SCHOOL YEAR

MEMBERSHIP STATUS

- New Member
- Renewing Member

RACE/ETHNIC BACKGROUND

- African American
- Asian
- Caucasian
- Hispanic
- Native American
- Multicultural

WHO DOES THE CHILD LIVE WITH?

- 2 Parent Family
- Mom Only
- Dad Only
- 1 Parent/1 step parent
- Grandparent
- Guardian(s)
- Other

IS YOUR CHILD ELIGIBLE FOR FREE OR REDUCED LUNCH?

- Yes
- No

MEMBER PLEDGE PRINCIPLES

I will give my best effort in all Club activities, treat others respectfully and through my positive behavior, promote a sense of fair play, honesty, and good sportsmanship. I will not allow anyone else to use my membership privileges. If any time I am suspended from attending the Club, I will return my membership card, forfeiting all Club privileges. I understand that all membership fees are not refundable.

I agree to uphold the Member Pledge Principles:

Member's Signature: _____

PARENTS/GUARDIANS

PLEASE CHECK YES or NO

I grant the Boys & Girls Club of Lenawee permission to:

- | | | |
|------------------------------|-----------------------------|---|
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | Use film/print pictures of my child, resulting from their involvement for Club promotions |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | Take my child on special field trips (I understand I will receive advance notice) |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | Contact my child's school to receive and/or send progress reports |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | Involve my child in informational program surveys to assess youth needs |

WAIVER OF DISABILITY AND DISCLAIMER: In consideration of my child's membership and participation in the activities and program of the Boys & Girls Club of Lenawee, I, as parent or guardian of named minor, my heirs, executors, administrators and assigns, waive, release, and discharge any and all rights and claims or damages against the Club and/or its sponsors for knowledge of the risks involved in said participation and that my child is in good health and has no physical or mental condition which would make it dangerous for my child or for other participants when my child is involved in any of the sponsored activities.

EMERGENCY AUTHORIZATION: I hereby give permission to medical personnel selected by the Boys & Girls Club of Lenawee, its employees, agents, directors, volunteers, or sponsors to provide or seek emergency treatment, (including x-rays) for my child in the event I cannot be reached in an emergency. However, the giving of my permission does not obligate the Boys & Girls Club, its employees, agents, directors, volunteers, or sponsors to arrange such care except as may be directed by medical personnel.

OPEN DOOR POLICY: I understand that the Boys & Girls Club of Lenawee is an open door facility and open to all youth members during posted hours of operation. My child will be supervised while at the Club. I set the boundaries and consequences if my child leaves the facility without my permission.

I certify that the information concerning the applicant is accurate:

Parent/Guardian's Signature _____ Date _____

All information requested on our membership application is kept strictly confidential. Free/reduced lunch status and race/ethnic background information is needed and only used for grant funding and reporting purposes.

Thank you for providing us with this important information.

The real cost of each youth membership is approximately \$500 annually. The quality programming at the Club is made possible through the generous support of individual donors, corporate sponsors, and foundation grants.

Please consider a tax deductible donation to the Boys & Girls Club of Lenawee:

\$ _____ Amount enclosed _____ Bill me _____