

Boys & Girls Club of Marshfield

***MEMBERSHIP APPLICATION (AGES 6-18)**

*A "renewal" form must be filled out on an annual basis

Name of child: _____

Address: _____

Telephone #: (____) _____ **E-mail: (parent)** _____

Gender: Male Female **Date of Birth:** ___ / ___ / ___

Ethnicity (optional): African-American Asian Caucasian Hispanic

Multi-Racial Native American Other _____

School (name): _____ **Grade:** _____

GENERAL INFORMATION (Please Print)

Mother/Guardian Name: _____

Work #: (____) _____ **Cell Phone #:** (____) _____

Father/Guardian Name: _____

Work #: (____) _____ **Cell Phone #:** (____) _____

Applicant Lives with (please check all that apply):

Both Parents Mother Father Aunt/Uncle Sister/Brother

Grandparent Guardian Other _____

Does your child qualify for the National School Lunch Program? No Reduced Price Free

(This information is collected for obtaining grants only)

MEDICAL INFORMATION

Medical Information (for reference in the event of an emergency)

Asthma No Yes **Allergies** No Yes please specify: _____

Physical Restrictions No Yes please specify: _____

Medications No Yes please specify: _____

Other Issues _____

Doctor: _____ **Clinic:** _____

Telephone #: _____ **Health Insurance** _____

The mission of BGCM is to help boys and girls develop the qualities needed to become responsible citizens and leaders. To achieve this, we offer a variety of program activities and support services designed to assist in the educational, emotional, physical and social development of 6 to 18 years olds, without regard to social, racial, ethnic, or religious background.

Emergency Contacts (specify 2 people we can contact if there is no answer at your home/work) **ONE MUST BE LOCAL**

(1) Name: _____

(2)Name: _____

Telephone #: (____) _____

Telephone #: (____) _____

Cell Phone #: (____) _____

Cell Phone #: (____) _____

Parents Please Read

LIABILITY CLAUSE

I hereby indemnify and hold harmless the Marshfield Boys And Girls Club, Inc. (the "Club") and its employees, agents, representatives and volunteers from any claims, damages, actions, causes of action arising from or resulting from any bodily injuries, the effects thereof, or losses and damages arising there from, incurred or suffered by my child while in the Club facility, engaged in any Club sponsored activity, or arising from the use of the Club's open door policy, unless such loss or injury results directly from the gross negligence or willful act of any of the Club's employees acting within the scope of their employment or any of the Club's agents, representatives and volunteers.

PHOTOGRAPHY RELEASE

I acknowledge that photographs may be taken of my child or children while they are either in the Club facility or engaged in Club sponsored activities in other locations and hereby consent to the use of such photographs by the Club in written material and press releases.

DROP IN POLICY

The Club maintains an open door policy at its facility in Library Plaza, Marshfield (the "Facility"). Members are supervised in the Facility for their own safety. The open door policy permits members to enter and leave the Facility at any time, and as many times, as they desire and no Club employee, agent, representative or volunteer shall be responsible for any member's decision to leave, nor shall they be responsible for ensuring a member stays in the Facility. Decisions related to how any member uses the open door policy are solely the responsibility of the child and his or her parent or guardian, and no employee, agent, representative or volunteer of the Club is responsible for enforcing those family decisions. Please be sure this open door policy is appropriate for your child/children.

MEDICAL EMERGENCY CONTACT

In the event of injury, or should emergency care be required and I cannot be reached, I authorize staff from Boys & Girls Clubs of Marshfield to sign for emergency medical attention for my child.

The completed application is factual and completed to the best of my ability. I understand that participation is contingent upon acknowledging receipt of BGCM's posted rules and a commitment to attend an orientation session within 30 days of enrollment. 6 and 7 year old members and parents are required to attend an orientation session prior to participation. A birth certificate is required for all 6 & 7 year olds.

_____ / ____ / ____

(signature of parent/guardian) (date)

Parents/Guardians – We need your help! Please check all that apply

Volunteer for special events _____ (Haunted house, golf tournament, administrative, etc)

Donate auction items _____ (gift certificates, services, products, sports items, etc)

Volunteer at the club _____ (sports, arts and crafts, homework help)

The Boys and Girls Club of Marshfield is a privately funded organization and depends on the generosity of individuals and corporations.

Office use only

Membership #: _____ Membership Date: ____ / ____ / ____

Membership Fee: _____ Date Fee Rec'd: ____ / ____ / ____

New Renewal Reinstated

Name of staff entering data: _____