MEMBERSHIP APPLICATION

School Year Fee $10.00 --- Summer Fee is Separate

First Name: ___________________________ Last Name: ___________________________

Birthdate: _____-____-____  Age: __________

Gender (Circle One): Male  Female  Other

Race/Ethnic Identity (select all that apply)

☐ American Indian or Alaska  ☐ Native Hawaiian or other Native
☐ Asian  ☐ Hispanic or Latino
☐ Black or African American  ☐ White
☐ Middle Eastern or North African  ☐ Bi-racial
☐ Other

Is Member in Foster Care?  ☐ Yes  ☐ No

Place of Membership (Check one):
☐ Thomas H. Lutsey (East)
☐ Bruce W. Nagel (West)

Type of Membership (Check one):
☐ New Membership
☐ Renew Membership

School information for 2019/2020 school year

School Name: ___________________________  Grade: _________

School Lunch:  ☐ Free/Reduced

Medical/Health Information

Allergies

Please list any allergies your child has that the Club should know about

__________________________________________

__________________________________________

Medical Conditions

☐ Asthma ☐ Diabetes ☐ Hearing Impairment ☐ Blindness ☐ ADHD ☐ Autism ☐ Seizures ☐ Anxiety / Depression

☐ Other: ____________

If your child requires any medication to be given while at the Club, please see the front desk for additional paperwork prior to your child starting their membership.
MEMBER NAME: ____________________________       Only Completed Forms will be Processed

Head of Household
Relationship to Member: ____________________________

Name: __________________________________________
Address: _________________________________________
City: _______________ Zip Code: _______________
Cell Phone: ________________________________
Work Phone: ________________________________
Home Phone: ________________________________
E-mail Address: ______________________________
Employer: ____________________________________

Parent/Guardian 2
Relationship to Member: ____________________________

Name: __________________________________________
Address: _________________________________________
City: _______________ Zip Code: _______________
Cell Phone: ________________________________
Work Phone: ________________________________
Home Phone: ________________________________
E-mail Address: ______________________________
Employer: ____________________________________

Emergency Contact: Please list additional contact(s) other than those above

Name: _________________________________________
Relationship to Member: ____________________________
Cell Phone: ________________________________
Home Phone: ________________________________
Is this person authorized to pick up member? □ Yes □ No

Confidential Information

Tribal Affiliation: □ Yes □ No
If yes, please list tribe name(s):
____________________________________________________

Is this a military family? □ Yes □ No

How many adults and youth live in your household:
#Adults _____ #Youth ______

Housing Type
□ Permanent (Own, rent etc.) □ Public Housing
□ Group Home □ Foster Home □ Homeless

Please indicate your total household income

☐ $0 - $10,000   ☐ $30,001 – $35,000
☐ $10,001 – $15,000    ☐ $35,001 – $40,000
☐ $15,001 – $20,000    ☐ $40,001 – $45,000
☐ $20,001 – $25,000    ☐ $45,001 – $50,000
☐ $25,001 – $30,000    ☐ $50,001 +

Parent/Guardian Signature_________________________ Date______________

*Your signature confirms that all information above is true and accurate and you agree to all releases & waivers on the next page.
Boys & Girls Club of Greater Green Bay Releases & Waivers Page

I, the parent/guardian of the minor child listed on this application, for ourselves, our heirs, executors and administrators, hereby release, waive, acquit and forever discharge the Boys & Girls Club of Greater Green Bay (BGCGB) and Boys & Girls Clubs of America (BGCA), their representatives, successors, insurers, assigns or any other person or entity associated with any of the above organizations such as staff, directors or volunteers, from all liability, claims, demands, or causes of action for any and all loss, damage, injury or death and any claim of damages resulting from use of facilities owned or controlled by the above organizations, or participation in activities of said organizations either at or away from the Club.

Data Collection I give my permission to the BGCGB to collect information via online or written surveys, questionnaires, interviews, and focus groups from the minor child listed on this application. Any and all information received will be kept strictly confidential. Data gathered through these means will be summarized in the aggregate and will exclude all references to any individual responses. The aggregated results of these analyses may be shared with Club staff, BGCA, funders, and other community stakeholders to evidence program effectiveness and/or Club impact on our members. This release may be revoked at any time by contacting the BGCGB in writing.

Medical I give permission to the BGCGB to seek emergency medical treatment for my minor child if I cannot be reached. I will be responsible for any/all costs of medical attention and treatment. Proper documentation must be provided in order for the BGCGB to distribute any medication.

Technology As a member of the Boys & Girls Club, your child may have access to the Internet. While the Boys & Girls Club has rules prohibiting such conduct and precautions are taken by the Club to prevent such access. The Boys & Girls Club will not be responsible for any unauthorized access.

Transportation Parents and Club members are responsible for their own transportation to and from the Club, unless otherwise specified. As a drop-in facility, we are not responsible for Club members’ whereabouts.

Data Sharing I give my permission to the BGCGB to share information about the minor child listed on this application with BGCA, the Brown County United Way, and Achieve Brown County for research purposes and/or to evaluate the program’s effectiveness. Information that will be disclosed to the above named parties may include the information provided on this membership application form, information provided by the minor child’s school or school district, and other information collected by BGCGB, including data collected via surveys or questionnaires. All information provided to BGCA, the Brown County United Way, and Achieve Brown County will be kept confidential. This release may be revoked at any time by contacting the BGCGB in writing.

School Communication I understand and consent to verbal communication between the Club and my child’s school for the purpose of health and safety.

Press I give permission for my child’s picture, video image, or any other graphic depiction or likeness, to be used by BGCGB and its activities and acknowledge neither more child nor I will receive payment for same.

Miscellaneous I understand who the Boys & Girls Club is not responsible for lost or stolen items. The Boys & Girls Club has an open door policy where members are allowed to come and go as they please. We assume no responsibility for members who choose not to attend on a particular day or who choose to leave early. Each Club has the right to make membership decisions based on the resources and capacity of their facility and staff. BGCGB reserves the right to decline the application, rescind the enrollment of, or suspend any youth that cannot successfully associate with other club members.

Art Work I grant the Boys & Girls Club of Greater Green Bay the irrevocable right to photograph / record my child’s physical likeness and any artwork or other projects created by my child and to use the said images in the production of promotional materials. I relinquish all rights to copyright, title, property interest and/or any other interest in said images and I waive the right to inspection and approval of the finished reproduction.