



**BOYS & GIRLS CLUBS**  
OF BENTON AND FRANKLIN  
COUNTIES

# GREAT FUTURES START HERE.

## REGISTRATION FORM

Child's Name: <small>First</small> <small>MI</small> <small>Last</small>			Birthdate: / /	
Ethnicity: <input type="checkbox"/> <i>Hispanic/Latino</i> <input type="checkbox"/> <i>Black/African American</i> <input type="checkbox"/> <i>Asian</i> <input type="checkbox"/> <i>Native Hawaiian/Pacific Islander</i> <input type="checkbox"/> <i>American Indian/Alaskan Native</i> <input type="checkbox"/> <i>White</i> <input type="checkbox"/> <i>Other</i>			Gender: <input type="checkbox"/> <i>Female</i> <input type="checkbox"/> <i>Male</i>	
Address:			City/State/Zip:	
Phone:			Email:	
School:			Teacher: Grade Level:	
Single parent home?: <input type="checkbox"/> Yes <input type="checkbox"/> No		Number of people living in household:		Lunch Status: <input type="checkbox"/> <i>Free</i> <input type="checkbox"/> <i>Reduced</i> <input type="checkbox"/> <i>None</i>

## CONTACT INFORMATION

Child Lives With: <small>(Check all that apply)</small> <input type="checkbox"/> <i>Mother</i> <input type="checkbox"/> <i>Father</i> <input type="checkbox"/> <i>Step Mother</i> <input type="checkbox"/> <i>Step Father</i> <input type="checkbox"/> <i>Grandparents</i> <input type="checkbox"/> <i>Foster Parents</i> <input type="checkbox"/> <i>Other:</i> _____				
Parent/Guardian: <small>First</small> <small>Last</small>			Primary Phone:	
Address:			City/State/Zip:	
Employer:			Work Phone:	
Parent/Guardian: <small>First</small> <small>Last</small>			Primary Phone:	
Address:			City/State/Zip:	
Employer:			Work Phone:	
Emergency Contact:	Address:		Phone:	
Emergency Contact:	Address:		Phone:	
Additional people authorized to pick up:				
People NOT authorized to pick up: <small>(A copy of the court order is required)</small>				

## MEDICAL INFORMATION

Primary Physician:	Address:	Phone:
Date of Last Visit:     /     /	Reason for Visit:	
Dentist:	Address:	Phone:
Insurance Carrier:	ID #:	Group #:
Behavior Concerns/Special Needs:		Does your child have an IEP? <input type="checkbox"/> Yes <input type="checkbox"/> No
Health Issues/Allergies:		Medications:

Annual Household Income ( <i>required for grant purposes, will remain confidential</i> ):
How did you hear about the Club:

**RELEASE & FINE PRINT:** I agree to abide by the terms and conditions of the Boys & Girls Clubs of Benton and Franklin Counties (BGCBFC) Parent Handbook. Available upon request, is the Policies and Procedures Manual including the Health Care Plan, Pesticide Policy, Safety Management Plan and Disaster Plan (licensed programs). I agree to permit my child to participate in field trips or other activities sponsored by the BGCBFC. This permission is given with the understanding that transportation, if needed, will be provided by the BGCBFC by Club vehicle, school buses, public transportation, or other approved and regulated methods of transportation. I certify that my child is covered by medical insurance as listed on the above Membership/Emergency Form. I understand that I am solely responsible to provide such coverage. I agree to abide by all the rules of the BGCBFC pertaining to the health and safety of the members and to inform the Club immediately of any change in my child's health, health care insurance, or medical provider. In case of serious accident or illness to my child, I hereby authorize the staff of the BGCBFC, my children's physician, dentist, emergency personnel, and those individuals named on the Membership Form to give any necessary treatment to my child, including emergency surgery, at my expense. I understand that there is a certain amount of risk involved in even the simplest of children's games, sports and activities, and I give permission for my child to participate in Club activities and programs. I agree that the BGCBFC, its employees, Board of Directors and affiliated agencies, shall not be liable for any claims, demands, injuries, damages, or actions to me or to my child as a result of my child's involvement in BGCBFC programs or activities. By signing my permission below, I give permission for the BGCBFC to use photographs and other types of media of my child for promotional purposes. If I wish to revoke this permission, I will specifically request a Public Relations Denial form. I understand that the BGCBFC works with officials, staff, teachers, and other interested parties in my child's school district for the express purpose of ensuring the Academic Success and wellbeing of my member. I give the BGCBFC, and its agents, permission to contact these individuals directly to discuss the attendance, grade progression, academic progress, disciplinary issues and other matters not specifically referenced of my child. I also hereby provide the School District with release to such documents that contain information regarding the learning assessment, reading level, homework status, behavior and other cognitive and skill-related determinations. The BGCBFC may share information about the child listed on this application with Boys & Girls Clubs of America (BGCA) for research purposes and/or to evaluate the program's effectiveness. Information that will be disclosed to BGCA may include the information provided on this membership application form, information provided by the child's school or school district, and other information collected by the BGCBFC. All information provided to BGCA will be kept confidential. I understand the implication of this Permission and Statement of Release. I certify that I am legally capable of executing this agreement, and that I have so of my own free will on the date indicated below, on behalf of myself, my spouse, if not signed separately, and our child for whom this form was prepared. I further certify that all information provided is the most current and understand that it is my duty to update this information should anything change.

Signature of Parent/Legal Guardian:	Date:     /     /
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**OUR MISSION:** To empower all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens.

**www.greatclubs.org     •     509.543.9980**

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\*Revised May 2018