



# MEMBERSHIP APPLICATION

Last Name	_____
Member #	_____
Branch	_____
Programs	_____

## Child Information

Last Name	_____	Street Address	_____		
First Name	_____	Mailing Address	_____		
MI	_____	Suffix (Jr., etc.)	_____		
Nickname	_____	City	_____		
Grade	_____	State	_____		
Gender (Circle One)	Male	Female	Zip	_____	
Ethnicity (check one)	Home Phone			_____	
<input type="checkbox"/> African-Amer.	<input type="checkbox"/> Caucasian	<input type="checkbox"/> Native Amer.	School	_____	
<input type="checkbox"/> Asian/Pacific	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Other	Date of Birth	_____	
				Number In Household:	_____

The following questions apply to SRP-MIC members only and in no way disqualifies acceptance for Boys & Girls Club membership. Are you a member of the SRP-MIC?  Yes  No If so, which community?  Salt River  Lehi

## Emergency Information

Contact (not guardian)	_____	Allergies	_____
Relationship to child	_____	Medications	_____
Contact's Phone #	_____	Health Ins. Carrier	_____

## Parent/Guardian Information

Last Name	_____	Last Name	_____
First Name	_____	First Name	_____
MI	_____	MI	_____
Suffix (Jr., etc.)	_____	Suffix (Jr., etc.)	_____
Relationship to child	_____	Relationship to child	_____
Marital Status	_____	Marital Status	_____
Street Address	_____	Street Address	_____
City	_____	City	_____
State	_____	State	_____
Zip	_____	Zip	_____
Home Ph#	_____	Home Ph#	_____
Business Ph#	_____	Business Ph#	_____
Cell Ph#	_____	Cell Ph#	_____
Email	_____	Email	_____
Employer	_____	Employer	_____
Job Title	_____	Job Title	_____

## Household Information

<b>Annual Household Income (check one)</b>	<input type="checkbox"/> Under \$10,000	<input type="checkbox"/> \$10,000 - \$19,999	<input type="checkbox"/> \$20,000 - \$29,999	<input type="checkbox"/> \$30,000 - \$39,999	<input type="checkbox"/> \$40,000 - \$49,999	<input type="checkbox"/> \$50,000 - \$99,999	<input type="checkbox"/> \$100,000+
<b>Active Military</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>Military Branch:</b>	_____			
<b>Member Lives With</b>	<input type="checkbox"/> Mother	<input type="checkbox"/> Father	<input type="checkbox"/> Step Parent	<input type="checkbox"/> Other			
<b>Single Parent Household</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No					
<b>** Family Participation in Assistance Programs-Check all that apply</b>							
<input type="checkbox"/> SSDI	<input type="checkbox"/> SSI	<input type="checkbox"/> TANF/AFDC	<input type="checkbox"/> Food Stamps	<input type="checkbox"/> Daycare Voucher			
<input type="checkbox"/> No Assistance	<input type="checkbox"/> School lunch program	<input type="checkbox"/> Veteran Compensation					

I hereby give my permission for my child to become a member of the Boys & Girls Clubs of Greater Scottsdale. I give my permission for emergency medical treatment of my child for illness or accident, if I cannot be contacted. I give full consent to publish all photographs, motion pictures and/or videos for any and all Club related exhibitions, public displays, publications and/or advertising purposes, without limitation or reservation. I also agree no compensation will be paid for any of the aforementioned. I understand that the Club is not responsible for the time or manner in which he/she arrives at or leaves the Club and that he/she may go at his/her own volition. If I do not want my child to leave the Club, I recognize that it is my responsibility to communicate that to him/her. I also understand that reentry is not allowed once my child leaves. The Boys & Girls Clubs and its property are not responsible for personal injury or loss of property.

Parent/Guardian Signature \_\_\_\_\_ Witness \_\_\_\_\_ Date \_\_\_\_\_

## Office Use Only

Start Date \_\_\_\_\_ Expiration Date \_\_\_\_\_ Revised March 2017



## PARENT/GUARDIAN AGREEMENT

I HAVE READ AND AGREED TO THE BOYS & GIRLS CLUBS OF GREATER SCOTTSDALE PARENT/GURADIAN HANDBOOK AND POLICIES. I UNDERSTAND WHAT IS EXPECTED OF MY CHILD AND MYSELF WHILE HE/ SHE ATTENDS THE CLUB. I AGREE TO EXPLAIN THESE EXPECTATIONS WITH MY CHILD. Please initial the boxes below:

- Technology Policy (I have read and agree)
- Behavior Policy (I have read and agree)
- The Boys & Girls Clubs of Greater Scottsdale has my authorization to use photographs, reproduction, and any sound recording of my child. Such use may include advertising and publicity purposes. (I attest that my child's identity is not under protection furthermore, he/she is not under court order or protective custody.)
- I approve the administration of pre/post surveys as well as online evaluation tools to my child while he/she is participating in the Boys & Girls Clubs of Greater Scottsdale program. I understand these results are helpful n evaluating the effectiveness of the program, which the information is strictly confidential, and that copies of the surveys/tools are available to me upon request.
- I acknowledge that as I am the parent/guardian signing the membership form, I am ultimately responsible for any/all monies due to the club on behalf of said member. I am aware that any information requested by a third party must be obtained by myself and passed on or requested in writing from the Branch Director and signed by the parent requesting the records.
- My teen has permission to use the rock wall as part of the available sports, fitness, and recreation programming. The climbing wall measure 10ft high and 30ft wide. Sturdy climbing mats are placed o the floor beneath the wall. Proper shoes must be worn to access the rock wall.
- I give my teen permission to watch PG-13 movies.
- I give my teen permission to play video games rated T for Teen.
- I give my teen permission to sign themselves out of the Club (must be 12 years old or older.) Please remember once they are signed out they may not return that day without a parent/guardian.

\_\_\_\_\_  
PARENT/GUARDIAN PINTED NAME

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CHILD'S NAME

\_\_\_\_\_  
CHILD'S NAME