

## **MEMBERSHIP APPLICATION**

First Name:	Middle:		Last:	
Gender:MF Ethnicity		DOB:		
Address:			Home Phone:	
City:	State:	County:	Zip:	
Father's Name				
Father's Employment				
Mother's Name				
Mother's Employment		Work Phone	Cell Phor	ne:
Guardian's Name	· · · · · · · · · · · · · · · · · · ·			
Guardian's Employment		Work Phone_	Cell Pho	ne:
Emergency Contacts:				
Name		Phone		
Name		Phone		
Name		Phone		
School Information: Current Teacher:				
School:		Grade:		
Medical Information: Does your family have health and				
Serious Health Problems:Ye				
Medications: YesNo If Y				
Allergies Yes No If Ye	es, explain:			

DATE	AGE	ACTIVITY	FEE

DATE	AGE	ACTIVITY	FEE



Household: NOTE: This information is collected for grant writing and grant reporting purposes ONLY					
Member lives with:MomStep MomDadStep DadGrandparent					
Foster parent(s) (please provide documentation)Other:					
Number in Household:					
Current Head of Household:FemaleMaleBoth					
Current Single Parent:YesNo					
I herby give permission for my child to become a member of Boys & Girls Club of Moultrie/Colquitt County. I will be responsible for any injuries, damages and destruction that his/her actions may cause. I agree not to hold Boys & Girls Club of Moultrie/Colquitt County, Georgia Department of Human Services or its representatives responsible for injuries or accidents in connections with the Club's activities that are a result of my child not following the rules of Boys & Girls Club. I authorize Boys & Girls Club to administer first aid in case of emergency treatment. I give consent for any photographs in which my child may appear to be used in any way the Boys & Girls Club may care to use them. I also pledge myself as "Partners" with Boys & Girls staff in helping my child to grow strong in moral, physical and mental strength.  My child has no physical condition that would prohibit him/her from being involved in the activity held by the Boys & Girls Club of Moultrie/Colquitt County.					
Disclaimer: APPLICATION FOR ATHLETICS/BUILDING CENTER PROGRAMS					
I, the parent of the above named child, hereby give approval to his/her participation in any and all league, after school, and summer camp activities. I assume all risks and hazards incidental to such participation including transportation to and from the league activities; and I hereby waive, release, absolve indemnify and agree to hold harmless the local Boys & Girls Club of Moultrie/Colquitt County, the organizers, sponsors, supervisors, participants and persons for any claim arising out of an injury to my child, except to the extent and in the amount covered by accident insurance.  I, the parent of the above named child, hereby state that my child is in good physical condition and not under the care of a physician or has any known health conditions that should prohibit him/her from participating in any club sponsored activity. I agree to return the uniform and other equipment issued to my child to the Boys & Girls Club or his coach one week from my child's last activity or pay the full purchase price to the Boys & Girls Club. I further agree to help the Boys & Girls Club of Moultrie/Colquitt County when possible in parent projects and abide by the standards for adults as established by the club.  I, the parent of the above named child, do hereby give the Boys & Girls Club of Moultrie/Colquitt County					
employees permission to treat my child in an emergency situation when neither parent can be reached. Treatment being administered by a physician/EMT's/locally established emergency room in hospital/clinic.					
Parent's Signature:					
FOR OFFICE USE ONLY Membership #:					
Entry Date:					
Birth Certificate on File:YesNo Fee Level:					
New Member: Renewal Member: Date:					
20202020202020					
Processed by:					