



BOYS & GIRLS CLUB

OF THE SOUTHERN SIERRA

MEMBERSHIP APPLICATION

131 S. Warner St., Ridgecrest, CA 93555
(760) 375-8870

Date _____

First Name: _____ Middle: _____ Last: _____

Nickname: _____

Address: _____ At this Address Since: _____

City: _____ State: _____ Zip: _____ In Area Since: _____

Telephone: _____ Birthdate: _____ Child's Age: _____

Ethnicity: _____ Gender: Male Female

School Information:

Current School: _____ Current Grade: _____ Current GPA: _____

Current Teacher: _____ Food Program: _____

Medical Information:

Doctor Name: _____ Doctor Phone: _____

Permission from Doctor/Hospital: Yes No

Does your family have health and/or accident insurance? Yes No Requests information

Insurance Carrier: _____

Policy#: _____ Group#: _____

Date Health Info received: _____

Serious Health Problems: Yes No

General:

My child has permission to be used in public relations materials: Yes No

My child may participate in all Boys & Girls Club activities in or adjacent to the club site: Yes No

My son/daughter will be walking home after the club closes: Yes No

T-Shirt Size: Small Medium Large X-Large

Reason(s) for joining: Fun Learning Sports Other: _____

Household:

Annual	\$0 - \$5,000 _____	\$30,001 - \$35,000 _____	\$60,001-\$65,000 _____
Gross	\$5,001 - \$15,000 _____	\$35,001 - \$40,000 _____	\$65,001-\$70,000 _____
Household	\$10,000 - \$15,000 _____	\$40,001 - \$45,000 _____	\$70,001-\$75,000 _____
Income:	\$15,001 - \$20,000 _____	\$45,001 - \$50,000 _____	\$75,001-\$80,000 _____
	\$20,001 - \$25,000 _____	\$50,001 - \$55,000 _____	\$80,001-\$85,000 _____
	\$25,001 - \$30,000 _____	\$55,001 - \$60,000 _____	\$85,001-\$90,000+ _____

Do you live with your: ___ Mom ___ StepMom ___ Dad ___ StepDad ___ Grandparent ___ Other: _____

Is there a Member of the Household 65 years or Older: ___ Yes ___ No

Is there a Member of the Household Handicapped: ___ Yes ___ No

Current Head of Household: ___ Male ___ Female

Current Single Parent: ___ Yes ___ No Current Number in Household: _____

Number of Brothers: ___ Ages: _____ Number of Sisters: ___ Ages: _____

Physical:

Eye Color: _____ Hair Color: _____ Skin Color/Features: _____

Height: _____ Weight: _____

Disclaimer:

In consideration of my child being permitted to participate directly or indirectly in various Boys and Girls Club of the Southern Sierra activities: I hereby agree to defend, indemnify and hold harmless the Southern Sierra Boys and Girls Club and their outreach units, Sierra Sands Unified School District, City of Ridgecrest, and their officers, employees, elected officials, agents and volunteers against all claims, demands, actions, suits, liabilities and judgments of every kind and nature regardless of the merit of the same, arising out of or in any way connected with the participation in the SSBGC sponsored events, activities programs and excursions.

I the undersigned have read and understand the above hold harmless statement. I authorize the club personnel, EMT, physician, or hospital to administrate emergency medical treatment in the event of an accident or sudden illness. I hereby give my permission to allow my child to be photographed and their picture may be used for promotional purpose. I further understand that the Boys & Girls Club has an "Open Door" policy, which means that my son/daughter may come and go at will. My signature indicates that I completely understand the above statements.

Print Parent Name: _____

Parents Signature: _____ Child's Signature: _____

FOR OFFICE USE ONLY

Membership#: _____

Entry Date: _____ Expiration Date: _____ Status: _____

Type: _____ New or Renewal Member: _____ Processed by: _____

MEMBERSHIP APPLICATION

Southern Sierra Boys & Girls Club Contacts and Emergency Responders

Childs Name: _____

Parent/Guardian:_____ Emergency:_____	Parent/Guardian:_____ Emergency:_____
Person Authorized to Pickup Child: _____	Person Authorized to Pickup Child: _____
Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Employer: _____	Employer: _____
Relationship: _____	Relationship: _____
Phone Home: _____	Phone Home: _____
Phone Work: _____	Phone Work: _____
Phone Cell: _____	Phone Cell: _____
Email: _____	Email: _____
Parent/Guardian:_____ Emergency:_____	Parent/Guardian:_____ Emergency:_____
Person Authorized to Pickup Child: _____	Person Authorized to Pickup Child: _____
Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Employer: _____	Employer: _____
Relationship: _____	Relationship: _____
Phone Home: _____	Phone Home: _____
Phone Work: _____	Phone Work: _____
Phone Cell: _____	Phone Cell: _____
Email: _____	Email: _____
Parent/Guardian:_____ Emergency:_____	Parent/Guardian:_____ Emergency:_____
Person Authorized to Pickup Child: _____	Person Authorized to Pickup Child: _____
Name: _____	Name: _____
Address: _____	Address: _____
_____	_____
Employer: _____	Employer: _____
Relationship: _____	Relationship: _____
Phone Home: _____	Phone Home: _____
Phone Work: _____	Phone Work: _____
Phone Cell: _____	Phone Cell: _____
Email: _____	Email: _____