

Todays Date: _____

Membership # _____

Member Informati	on:					
First Name:		Middle:		Last Name:		
Address:						
City:		State	:	Zip:	_	
Primary Phone #: _			Age: _	Birth Da	ate:	
Gender: Male	Female	Shirt Size:		Can Member Swim	: Yes	No
School Attending _	ding Grade					
	Alaska Native forth African	Asian Native Hawaiian or		African American nder W	Hispai hite	nic/Latino
Confidential Inform						
_		•		ng our organization red		•
provide are confider	itiai. Your coop	eration in providing th	nis informat	tion is both appreciated	and nece	ssary.
Annual Household	Income: \$					
Do You Live at a Pu	ıblic Housing Pr	operty?Yes _	No			
Circle All That Ap	plv:					
		Volunteer Food Star	nps Veter	an Comp		
General Assistance	Free or Redu	iced-Price School Lun	ıch			
Circle Child's Fam	aily Setting:					
2 Parent Si	ngle Parent	Grandparent(s)	Other Fa	mily Member(s)	Foster	Care
Number of Family M	Members in the H	Household:				
Is Parent(s) Active I	Military:	YesNo	Is Par	rent(s) a Veteran:	Yes	No



Family Information: Head of Household Name: Head of Household Phone #: Mother's Name: Mother's Cell Phone #: () _____ Mother's Work Phone #: (______ Father's Name: Name of Guardian (if different from mother or father): Relationship to Member: Guardian's Cell Phone #: (_____) Guardian's Work Phone #: () Parent/Guardian E-mail Address: _____ Emergency Contact Cell Phone #: _____ Additional Pick-Up Persons: 1. _______2. ______2. Not authorized to Pick-Up: 1. **Medical:** Please Indicate Medical Problems and/or Allergies: Please Indicate Any Medication Presently Taking: Physical or Mental Limitations:



General Permissions:

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 Lac Courte Oreilles and Boys & Girls Clubs of America, 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.

Medical Treatment

I give permission to the Boys & Girls Club of Lac Courte Oreilles 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.

Data Collection

I give my permission to the Boys & Girls Club of Lac Courte Oreilles to collect information via online or written surveys, questionnaires, interviews, and focus groups from the minor child listed on this application. 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, Boys & Girls Clubs of America (BGCA), funders, and other community stakeholders to evidence program effectiveness and/or Club impact on our members.

School Information

I give my permission to the Boys & Girls Club of Lac Courte Oreilles and ______School District to exchange information regarding the minor child listed on this application. The purpose of the exchange is to help both organizations do a better job of helping the student be successful in school, in the Boys & Girls Club and in life.

Technology

As a member of the Boys & Girls Club, your child will have access to the Internet. While precautions are being taken, it is possible she/he will access inappropriate sites. The Boys & Girls Club will have rules and consequences at the Club for such behavior; however, we will not be responsible for the consequences of such access.

Miscellaneous

I understand the Boys & Girls Club is not responsible for lost or stolen items. Parents and Club members are responsible for their own transportation to and from the Club. As a drop-in facility, we are not responsible for Club members' whereabouts.

Photography Sharing

I give permission for my child's picture, moving pictures, or any other graphic depiction or likeness, to be used by the Boys & Girls Club of Lac Courte Oreilles, BGCA, and all other partners of the Boys and Girls Club of Lac Courte Oreilles and its activities.



Information Sharing

I give my permission to the Boys & Girls Club of Lac Courte Oreilles to share information about the minor 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 minor child's school or school district, and other information collected by Boys & Girls Club of Lac Courte Oreilles, including data collected via surveys or questionnaires. All information provided to BGCA will be kept confidential.

Transportation

I give my child permission to leave the Boys and Girls Club of Lac Courte Oreilles premises with Club staff/volunteers in registered vehicles of the Boys and Girls Club of Lac Courte Oreilles to attend off site activities and for transportation to and from the Boys and Girls Club of Lac Courte Oreilles.

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19** is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. Boys & Girls Clubs of Lac Courte Oreilles has put in place preventative measures to reduce the spread of COVID-19; however, the Club cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending the Club could increase your risk and your child(ren)'s risk of contracting COVID-19. By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending the Club and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Club may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Club employees, volunteers, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at the Boys and Girls Club of Lac Courte Oreilles or participation in Club programming ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the Club, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs, or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Club, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Club program.

I also understand the Club is not, nor does it claim to be, a licensed day care center.
I have read the completed application and this form, understand the rules of the Boys & Girls Club of Lac
Courte Oreilles, and request my child be admitted into membership.

Parent / Guardian Signature		
Club Member's Signature	 	
Date:/		