



BOYS & GIRLS CLUBS
OF PITT COUNTY

2008 MEMBERSHIP APPLICATION

CLUB: _____

THIS SECTION IS FOR OFFICE USE ONLY

Card #: _____ Date Enrolled: _____ Paid: _____

PLEASE ANSWER ALL QUESTIONS

Child's Name: _____ Social Security #: _____ Age: _____

Phone #: _____ Street Address: _____

City: _____ Zip Code: _____ Date of Birth**: _____

Gender: Male _____ Female _____

Race: (Circle One): African American _____ Caucasian _____ Hispanic _____ Asian/Pacific Islander _____
Native American _____ Other _____

Father's Name: _____ Work #: _____

Employer: _____ Position: _____

Mother's Name: _____ Work #: _____

Employer: _____ Position: _____

With whom does your child reside? (Circle One):

Parents _____ Mother & Stepfather _____ Father & Stepmother _____ Mother Only _____ Father Only _____

Foster Care _____ Group Home _____ Other: _____

What school does your child attend: _____ Current Grade Level: _____

Annual Family Income (for United Way Survey) _____ \$0 – 10,000 _____ \$25,000-34,999

_____ \$10,000 – 14,999 _____ \$35,000-49,999

_____ \$15,000 – 24,999 _____ \$ 50,000 & over

Number of people in the household: _____

Does your child receive free or reduced meals at school? _____ Free _____ Reduced _____ None

**** WE REQUIRE A COPY OF A BIRTH CERTIFICATE FOR SIX YEAR OLD MEMBERS BEFORE THEY START ATTENDING THE CLUB. ****

Who referred you to the Boys & Girls Clubs of Pitt County? _____

Was your child a member of this Boys & Girls Club last year? _____ Yes _____ No

What illnesses does your child have which the Boys & Girls Clubs should know about? _____

Does your child regularly take any prescription medication? _____ Yes _____ No

If so, what type of medication? _____

EMERGENCY INFORMATION

Please authorize a person to act for the parent in the event of an emergency:

Name: _____ Home #: _____

Address: _____ Work #: _____

Employer: _____ Relationship to Member: _____

Family Physician or Pediatrician: _____ Office #: _____

Please list those who are authorized to pick your child up from the Boys & Girls Club (use separate sheet if necessary):

Name Phone Relationship to Member

Name Phone Relationship to Member

Name Phone Relationship to Member

I request that my son/daughter be admitted to membership in the Boys & Girls Club. I will be responsible for any inappropriate behavior and/or damage that he/she may cause.

I agree not to hold the Boys & Girls Clubs or its representatives responsible for injuries or accidents in connection with the Club's activities and authorize the Club to administer first aid in case of injury (every attempt will be made to contact parents/guardians). If an injury appears serious enough for hospitalization or medical care, such expense will be borne by the parents or guardians.

I give my consent to the Boys & Girls Clubs of Pitt County to use my child's photograph or likeness for items such as public relations or recognition of programs and activities. My child also has permission to attend any field trips, within Pitt County, which include ECU, movies, bowling, etc.

I also give my consent to the Boys & Girls Clubs of Pitt County to obtain information from my child's school for information such as grade point average, number of in-school and out of school suspensions and the number of days absent.

Please remember that the Boys & Girls Clubs have an open door policy that permits children to come to the club when they want to, and leave to go home when they want to. If you want your child to remain on the premises please instruct them accordingly.

THERE ARE NO REFUNDS PROVIDED BY THE BOYS & GIRLS CLUB FOR ANY AND ALL FEES!

Signature of Parent/Guardian _____

Date _____