



2009 Membership Form

Summer Fee: **\$10**

Membership expires after 09/01/2009

www.BGClubIdaho.org

Moseley Center

610 E. 42nd Street
Garden City, ID 83714
(208) 321-9157
Admin: (208) 376-4960

Meridian Unit

911 N. Meridian Rd.
Meridian, ID 83642
(208) 888-5392

Member Information	<input type="checkbox"/> New Member		
	<input type="checkbox"/> Renewing Member		
	First Name _____	Middle Name _____	Last Name _____
	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Ethnicity: <input type="checkbox"/> Caucasian (white) <input type="checkbox"/> African <input type="checkbox"/> Asian	<input type="checkbox"/> Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Other (multi-racial)
	Date of Birth: ____/____/____ <small>Month Day Year</small>		
List all special needs or health issues: _____			
List all medications taken regularly: _____			
Is this child covered in an insurance plan? <input type="checkbox"/> Yes <input type="checkbox"/> Yes- Medicaid <input type="checkbox"/> No			
School: _____		Current Grade: _____ <small>Note: During summer, use next school year's grade</small>	

Household Information	<input type="checkbox"/> Household information is the same as this member: _____		
	Address _____ _____ _____	Combined Income: <input type="checkbox"/> 0-\$10,800 <input type="checkbox"/> \$10,800-\$14,500 <input type="checkbox"/> \$14,500-\$18,300 <input type="checkbox"/> \$18,300-\$22,000 <input type="checkbox"/> \$22,000-\$29,500 <input type="checkbox"/> \$29,500-\$33,200 <input type="checkbox"/> \$33,200-\$37,000 <input type="checkbox"/> >\$37,000	Single parent household? <input type="checkbox"/> Yes <input type="checkbox"/> No Member of military in the house? <input type="checkbox"/> Yes <input type="checkbox"/> No Number of residents in house: _____ Foster children in house? <input type="checkbox"/> Yes <input type="checkbox"/> No
	City _____ State _____ Zip Code _____		
	Main Phone Number _____		

Contact Information	<input type="checkbox"/> Contact information is the same as this member: _____			
	<i>Primary Contact</i>			
	First Name _____	Last Name _____	Relationship to Child _____	Email Address _____
				Contact Notes: _____
	Cell Phone Number _____	Work Phone Number _____	Home Phone Number _____	
	<i>Secondary Contact</i>			
	First Name _____	Last Name _____	Relationship to Child _____	Email Address _____
				Contact Notes: _____
	Cell Phone Number _____	Work Phone Number _____	Home Phone Number _____	
	<i>Additional Contact</i>			
First Name _____	Last Name _____	Relationship to Child _____	Email Address _____	
			Contact Notes: _____	
Cell Phone Number _____	Work Phone Number _____	Home Phone Number _____		

<input type="checkbox"/> Payment Received <input type="checkbox"/> Data Entered <input type="checkbox"/> F/R Lunch Form	Initials: _____ Date: _____
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Member Agreement

I will follow the rules of the Boys & Girls Club
I will be respectful, responsible and show integrity
I will take care of my Club and it's members

Member Signature: _____ Date: _____

Guardian Agreement

Please initial to indicate you know and accept the following terms of membership:

- _____ The Club **can not be held liable for injuries or accidents** that may occur at the Club or during Club-sponsored events. The Club does have an insurance policy that covers medical expenses for such accidents.
- _____ Authorized Club Personnel may **provide medical assistance** to members in the form of CPR, first aid, and transport to medical facilities as deemed necessary and without parental consent.
- _____ Authorized Club Personnel **can not administer medications** nor provide other-the-counter drugs to members. Members must bring and be able to self-administer any medications they require.
- _____ The Club can not be help responsible for the manor in which members **arrive and depart**. Such arrangements are strictly between the member and their guardians.
- _____ Following our Positive Choice Policy, in circumstances where the member repeatedly does not follow Club rules, a guardian will be contacted and **must be able to pick up the Member** from the Club immediately.
- _____ All members may be **photographed, surveyed or interviewed** as those activities pertain to official business of the Boys & Girls Clubs of Ada County.
- _____ All **off-site activities** require the expressed, written **consent of a guardian**.
- _____ Additional terms and rules are outlined in the **Release of Liability, Club Member Code of Conduct and the Computer Acceptable Use Guidelines**. Ask at the front desk for a copy of these documents. Signing below constitutes agreement with all terms and rules in these documents.

Guardian Signature: _____ Date: _____