

Before/After School Program

CLUB MEMBER INFORMATION

First Name _____ MI _____ Last Name _____

Address _____ City _____ State _____ Zip _____

DOB _____ Age _____ Gender Male / Female Home Phone (____) _____

Ethnicity: African American / Asian / Hispanic / Latino / Native American / Caucasian / Other Single Parent Household: Y / N

Current Teacher _____ Current School _____ 20-21 School Grade _____

PARENT/GUARDIAN INFORMATION

Relationship _____ First Name _____ Last Name _____

Employer _____ Work # _____ Cell # _____

Relationship _____ First Name _____ Last Name _____

Employer _____ Work # _____ Cell # _____

*EMERGENCY CONTACT

Relationship _____ First, Last Name _____ Home/Work Cell _____

Relationship _____ First, Last Name _____ Home/Work Cell _____

*Please include emergency contact other than yourself.

Which Hospital do you use? Tahlequah City Hastings

DISCLAIMER

I GRANT PERMISSION FOR:

The child listed on this form to become a member of the Boys & Girls Club. If necessary, the Boys & Girls Club and/or employees may administer first-aid or emergency treatment procedures to my child, which may include admission to a hospital. _____

(Please Initial)

I UNDERSTAND THAT:

Parents/Guardians are responsible for dropping off and/or picking up their child promptly, according to the hours of operation. The Boys & Girls Club of Tahlequah nor Keys Public Schools is responsible for loss or theft of personal property. _____

(Please Initial)

I UNDERSTAND THAT:

Continual discipline problems could result in removal from the program. _____

(Please Initial)

ADDITIONAL INFORMATION

My child has permission to be used in public material (after-school program only) Y / N

My child has permission to release his/her grades to the program director (for after-school tutor purposes) Y / N

My child may participate in all club activities in or around the facilities (after-school program only) Y / N

PARENT / GUARDIAN SIGNATURE _____ DATE _____

Before/After School Program

RELEASE OF LIABILITY

The undersigned releases and agrees to hold harmless the Board of Directors, the staff, the funders, 21st Century, Keys Public Schools, the National Boys & Girls Clubs of America with whom the Boys & Girls Club of Tahlequah, Keys Unit, is affiliated, and the Southwestern Regional Office of Boys & Girls Clubs of America, from any liability, injury, damages, loss, accidents, delay or irregularity related to the undersigned individuals planned participation or involvement in the following project:

MISSION STATEMENT

To enable all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens.

POWER HOUR: The first hour is an academic success program, example: homework help, tutoring and high-yield learning activities. Your child will benefit the most from regular attendance, and waiting until after 4:15 to pick your child up from the program.

This release covers all rights and actions of every kind, nature and description, which the undersigned ever had or will have. This release includes the undersigned, his heirs, representatives and assignees.

(Child's) Participants Signature: _____

Parent / Legal Guardians Signature: _____

Date: _____

TRANSPORTATION AUTHORIZATION

Parents are responsible for picking up their children by 5:30. If parents are unable to pick up, bus transportation will be furnished for After-School participants.

_____ I will pick up my child from the After-School Program. Below are the names of persons authorized to pick up my child:

_____ I give permission for my child to walk home each day from the After-School Program. I understand that program staff will not be responsible for my child once he/she leaves the program site. The route my child will walk is:

_____ I would like my child to have bus transportation from the program site.

PARENT/GUARDIAN SIGNATURE _____ DATE _____