



Membership Application

Today's Date

/ /

Clubhouse:
Program Year:

Confidentiality: Any confidential information requested is for Madison's records and helps us receive funding. The answers you provide will be kept completely confidential. Your cooperation in providing this information is both appreciated and necessary.

Child (Member) Information *(Please Print)*

First Name: Middle initial: Last Name:

Gender: Male Female Birth Date: / / Age: E Mail Address(es):
Member:
Parent/Guardian:

Ethnicity:
 African American African American & Caribbean African American & Hispanic
 Asian Canadian Caribbean American
 Caucasian Hispanic Other

School: Current Grade:

Referring Organization:
 Church Community Outreach Friend/Family
 Juvenile Justice Social Services Renewed Member
 School Shelter Social Services Other _____

Home Address: Employment/Company Name:

Are you a Boys & Girls Club Alumni?
Yes No If YES, which Club?

(City) (State) (Zip Code) Phone Number: Home Mobile Phone Number: Work Mobile

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Parent / Guardian *(Please Print)*

First Name: Last Name: Household Family Size: _____
 1 Parent 2 Parent

First Name: Last Name:
 Children Other Relatives

Relationship(s) To Member:
E.g. Uncle, Aunt, Sister Etc.

Other Address (if different from above):

 (City) (State) (Zip Code)

Family Income:

- \$0 - \$5,000
- \$5,001 - \$15,000
- \$15,001 - \$30,000
- \$30,001 - \$50,000
- \$50,001 +

Income information is required but will not be shared with any outside agencies. We only use the data as a collective percentage to share with supporters to fund the Boys & Girls Club experience.

Other E--Mail Address (if different from above):

Parental Authorization for Pick Up Information (Please Print)

I give permission for the following individuals to pick-up my child daily or as necessary from the Madison Square Boys & Girls Club. I also accept that my child will not be released to anyone that is not on this list. Furthermore, I agree that each authorized individual will be required to show a government issued photo ID.

Adult Name:

Phone:

Adult Name:

Phone:

Daily Dismissal with or without Supervision

Parent Signature: _____ **I DO** give permission for my child age _____ to be dismissed at the end of the program day without parental/guardian supervision.

Parent Signature: _____ **I DO NOT** give permission for my child age _____ to be dismissed at the end of the program day without parental/guardian supervision.

Witnessed by: _____ Staff Position _____ Date _____

LIABILITY CLAUSE:

I understand that the Madison Square Boys & Girls Club shall not be responsible or legally liable for any bodily injuries or the result thereof incurred and suffered by my son/daughter on any property of the Madison Square Boys & Girls Club, Inc. or while engaged in any of its activities away from the club, unless such loss or injury results directly from negligence or willful act of an employee of Madison Square Boys & Girls Club acting within the scope of his/her employment.

MEDICAL EMERGENCY CONSENT:

I consent that in the event of a medical emergency that my child be given medical treatment at a local health care agency. I also give consent for the staff to act in my absence as guardian of my child in the event of a medical emergency.

PUBLICATION RELEASE:

I hereby consent to the publication and use of my child's name and/or likeness by Madison Square Boys & Girls Club, Boys & Girls Clubs of America and other partners for purposes of promotion, publicity, fundraising or other legal purpose in all media including, but not limited to photographs, sound and/or video recordings, films, broadcasts, publications, web pages or promotional materials. I agree that the material involved is and shall continue to be the property of Madison and that neither I, nor my child, shall have any right of review or approval regarding the use of my child's name and/or likeness in connection with such material. I understand and agree that neither I, nor my child, will be compensated in any way for the use of my child's name and/or likeness by Madison. I hereby release Madison Square Boys & Girls Club, along with their respective employees, agents, affiliates, sponsors, trustees or other representatives, from any and all claims, demands, or causes of action, in law or equity, whether known or unknown, arising out of the use of my child's name and/or likeness, in accordance with the terms of this release.

REPORT CARD RELEASE STATEMENT:

I will provide each Report Card one week following its release and notify staff of any significant change in my child's academic standing and/or performance. I also give permission for Madison personnel to access my child's report card directly from the school. **NOTE:** Information is used in aggregate form only to generate funding for Madison programs. I also understand that I have the right to cancel my permission to release information at any time.

DROP-IN POLICY: We discourage youth leaving the clubhouse unsupervised & multiple exits. Such behavior will warrant a parent conversation.

Children 6-18 years of age are welcomed and supervised in the facility in terms of safety and citizenship. Our staff does not grant permission to club members to leave the club, nor do we insist they stay. The decision as to when a child arrives and leaves the club, and with who is a matter handled between parent and child. Children not mature enough to capably handle the responsibility should have the close supervision of other more appropriate childcare services. We are concerned about this and we encourage you to join us in helping your children grow during the time spent at the club by enrolling them in our programs.

I certify that I have reviewed & agree with the above consent statements for the current program year. I understand that consent is voluntary & I can withdraw it in writing at any time.

Parent/Guardian Signature

Member's Signature

Date