



BOYS & GIRLS CLUB of Bay Mills/Brimley

Child Information

CHILD'S NAME

Last

First

Middle

Address

Street

City

State

Zip

Gender *Please Circle*

BOY

GIRL

Age _____

Date of Birth _____

Grade _____

School _____

Optional *For Grant Purposes Only*

Ethnicity _____

Parent Information

Please be certain phone numbers listed are valid and available at all times.

MOTHER'S NAME

Last

First

Middle Initial

Address

Street

City

State

Zip

Telephone Home _____

Cell _____

Work _____

E-mail Address _____

Place of Employment _____

FATHER'S NAME

Last

First

Middle Initial

Address

Street

City

State

Zip

Telephone Home _____

Cell _____

Work _____

E-mail Address _____

Place of Employment _____

Child Information

For households with more than one child

CHILD'S NAME

Last

First

Middle

Address

Street

City

State

Zip

Gender

Please Circle

BOY

GIRL

Age _____

Date of Birth _____

Grade

School

Optional

For Grant Purposes Only

Ethnicity

CHILD'S NAME

Last

First

Middle

Address

Street

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State

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Gender

Please Circle

BOY

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Ethnicity

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Address

Street

City

State

Zip

Gender

Please Circle

BOY

GIRL

Age _____

Date of Birth _____

Grade

School

Optional

For Grant Purposes Only

Ethnicity

Guardian Information (If Applicable)

GUARDIAN'S NAME _____
Last First Middle Initial

Address _____
Street City State Zip

Telephone Home _____ Cell _____ Work _____

E-mail Address _____

Place of Employment _____

Emergency Contact

*If parent/guardian cannot be reached in an emergency, the following individuals may be called.
Please ask permission before listing an individual as contact person.*

NAME _____
Last First Relationship to Child

Address _____
Street City State Zip

Telephone Home _____ Cell _____ Work _____

NAME _____
Last First Relationship to Child

Address _____
Street City State Zip

Telephone Home _____ Cell _____ Work _____

NAME _____
Last First Relationship to Child

Address _____
Street City State Zip

Telephone Home _____ Cell _____ Work _____

In the event that I cannot be consulted, I authorize that the above named person(s), physicians and/or medical personnel be notified and their recommendations followed in case of illness or injury. I authorize emergency transportation if deemed necessary.

Parent/Guardian Signature _____ **Date** _____

Unauthorized Pick-Up

*The following persons listed are not allowed to pick-up my child at any time.
I will notify Club staff when changes are needed. Additional documentation may be necessary.*

Please List

Parent/Guardian Signature

Date

The following information is used to determine yearly dues per club member. It also enables the Boys and Girls Club to provide accurate information when reporting for grants that provide funding for our services.

Dues must be paid by **September 30th** or your child(ren) may not attend the Club.

Name of Club Member(s): _____

The following information is for grant reporting purposes. Please submit proof of income as well as names and birthdates of household members, including all adults, children, and yourself.

Please Circle the Box that is Closest to Your Total Family Income Based on Size.

| Family Size | Yearly Income is This or less | Yearly Income is This or Less | Yearly Income is This or Less | Yearly Income is This or Less | Yearly Income is More than This |
|-----------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|---------------------------------|
| 2 | \$ 14,710.00 | \$ 18,384.00 | \$ 22,068.00 | \$ 44,149.99 | \$44,150.00 |
| 3 | \$ 18,530.00 | \$ 23,160.00 | \$ 27,792.00 | \$ 54,537.99 | \$54,538.00 |
| 4 | \$ 22,350.00 | \$ 27,936.00 | \$ 33,528.00 | \$ 64,926.99 | \$64,927.00 |
| 5 | \$ 26,170.00 | \$ 32,712.00 | \$ 39,252.00 | \$ 73,314.99 | \$73,315.00 |
| 6 | \$ 29,990.00 | \$ 37,488.00 | \$ 44,988.00 | \$ 85,702.99 | \$85,703.00 |
| 7 | \$ 33,810.00 | \$ 42,264.00 | \$ 50,712.00 | \$ 87,650.99 | \$87,651.00 |
| 8 | \$ 37,630.00 | \$ 47,040.00 | \$ 56,448.00 | \$ 89,598.99 | \$89,599.00 |
| Dues Per Club Member | \$ 12.00 | \$ 15.00 | \$ 18.00 | \$ 21.00 | |

Your Name and Birthdate: _____

Additional Adults and Birthdates: _____

Children's Names and Birthdates: _____

| | |
|----------------------------|-------------------|
| Parent/Guardian Name _____ | |
| Dues Per Child _____ | Cash |
| x # of Children _____ | Check |
| Total Due _____ | Payroll Deduction |
| Staff Signature _____ | |

