



# Summer Program 2022

## 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 \_\_\_\_\_ 21-22 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 \_\_\_\_\_

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. \_\_\_\_\_

(Initials)

### **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 Woodall Public School is responsible for loss or theft of personal property.

\_\_\_\_\_  
(Initials)

### **I UNDERSTAND THAT:**

Continual discipline problems could result in removal of the program. \_\_\_\_\_

(Initials)

### **I UNDERSTAND THAT:**

My child has permission to be used in public material \_\_\_\_\_

(Initials)

## **TRANSPORTATION**

Bus transportation will be available during the Summer Program for students in the Woodall Public School district. Parents are responsible for picking up their children if they do not ride the bus and are out of district.

Regular school year bus route number? \_\_\_\_\_ Driver? \_\_\_\_\_

Below are the names of persons authorized to pick up my child:

\_\_\_\_\_

## **RELEASE OF LIABILITY**

The undersigned releases and agrees to hold harmless the Board of Directors, the staff, the funders, Woodall Public School, the National Boys & Girls Clubs of America with whom the Boys & Girls Club of Tahlequah 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:

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.

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_