



**Member**

_____		_____	_____	
First Name		M.I.	Last Name	
_____			_____	
Address			Employer	
_____		_____	Date of Birth	
City	State	ZIP	MM	DD
_____		_____	YYYY	
Home Phone _____		Work Phone _____		
Mobile Phone _____		Email Address _____		

**Contact Information**

<b>Emergency Contact</b>				
_____		_____		
First Name		Last Name		
_____		_____	_____	_____
Address		City	State	ZIP
Home Phone _____	Mobile Phone _____	Employer _____	Work Phone _____	
Email _____	Relationship to Member _____			

I understand that my picture/video may be taken for media and/or public relations and allow for these representations to be used for media and/or public relations purposes unless I submit a statement to the contrary to appropriate Boys & Girls Club staff. I understand that if an accident were to occur, I will not hold the staff, volunteers or the Boys & Girls Club liable. I will take full responsibility for any medical needs I may have due to an accident in the program. I understand that the Boys & Girls Club will not be responsible for lost or stolen articles.

Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>For Office Use Only</b>				
MEM#:	_____	ENROLLDATE:	_____	
EXPDATE:	_____	NEW/RENEW? _____	FEE: _____	STAFFINT: _____

The Boys & Girls Club does not discriminate on the basis of race, color, sex, age, handicap, religion, income, sexual orientation, or national origin. Any person who believes that he or she has been discriminated against in anyway should contact the Chief Executive Officer at 262.654.6200 or write to 1330 52<sup>nd</sup> Street, Kenosha, WI 53141