



**BOYS & GIRLS CLUB  
OF kenosha**

**Registration Guidelines**

- [ **Registration/payment must be done in person.** Not accepted via fax, phone, or e-mail
- [ Copy of **school report card** (progress report) or school registration **required** for Grades 1-8 to verify school and grade. (FOOTBALL ONLY)
- [ **Members receiving free/reduced lunch MUST provide KUSD lunch form for current school year.**
- [ All Past Due Balances must be paid in full prior to registering for new activity.

**Registration Form**

**Sport:** \_\_\_\_\_ **Division/Class:** \_\_\_\_\_ **Comments:** \_\_\_\_\_

**Football Only:** Team \_\_\_\_\_ **Position Played** \_\_\_\_\_

**Child Name:**

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last: \_\_\_\_\_

Gender: \_\_\_\_\_M \_\_\_\_\_F DOB: \_\_\_\_\_ Age \_\_\_\_\_ Weight(Football Only) \_\_\_\_\_

Race: African American \_\_\_\_\_ Asian/Pacific Islander \_\_\_\_\_ Caucasian \_\_\_\_\_ Hispanic \_\_\_\_\_ Bi-Racial \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

**School Information:**

School: \_\_\_\_\_ **Grade:** \_\_\_\_\_ Free or Reduced Lunch: \_\_\_ Yes \_\_\_ No

**Branch of Military:** Air Force \_\_\_\_\_ Marines: \_\_\_\_\_ Navy: \_\_\_\_\_ Army: \_\_\_\_\_ Reserves/Branch: \_\_\_\_\_

**Family Contact Information:**

*Mother/Stepmother/Guardian Full Name* (First) \_\_\_\_\_ (Last) \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
If different than child's

Email: \_\_\_\_\_ Employer: \_\_\_\_\_

*Father/Stepfather/Guardian Full Name* (First) \_\_\_\_\_ (Last) \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
If different than child's

Email: \_\_\_\_\_ Employer: \_\_\_\_\_

**INFORMATION AND SIGNATURE NEED TO BE FILLED OUT ON REVERSE SIDE**

**Medical:**

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Any medical conditions?  Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Please list any and all allergies: \_\_\_\_\_

Is this child currently taking any medications?  Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

**Household Information: NOTE: This information is collected for funding purposes only and will be kept extremely confidential**

Member lives with (Check)  Mom  Step mom  Dad  Grandparent  Foster parents  
 Other \_\_\_\_\_

Household income (Check) \$14,999  \$15,000-\$24,999  \$25,000-34,999  \$35,000-\$49,000  \$50,000+

Verify Number in Household: \_\_\_\_\_ Current Single Parent: \_\_\_Yes \_\_\_No

**Notices:**

It is the responsibility of the parent/guardian to be sure that their child remains at the program until you or an authorized person picks them up or you have given permission to leave. I understand that my child may be suspended from the program for any unsportsmanlike behavior. Reinstatement process would include a meeting with Athletics Director and Sports Committee. I understand that my child's picture/video may be taken for the media and/or public relations and allow these pictures, as well as my email, to be used for media and/or public relations purposes unless I submit in writing to Boys & Girls Club (not coaches). I understand that if an accident occurs I will not hold the staff, volunteers or Boys & Girls Club liable. I will take full responsibility for any medical needs my child may have due to an accident in the program. I understand that the Boys & Girls Club is not responsible for any lost or stolen articles. I give permission for the volunteer (prior arrangements) to transport my child if I am unable to drop off/pick up my child from any event involving their participation with a Boys & Girls Club of Kenosha activity. I do not hold Boys & Girls Club of Kenosha or their volunteers responsible for any incidents that may occur during transportation.

**Parent or Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FOR OFFICE USE ONLY** Date Received: \_\_\_\_\_ Processed by: \_\_\_\_\_

Amount Paid: \_\_\_\_\_ Check #: \_\_\_\_\_ Cash: \_\_\_\_\_ Charge: \_\_\_\_\_

Verified School Grade By Viewing Report Card Staff Initial: \_\_\_\_\_