



MEMBERSHIP INTAKE FORM

BOYS & GIRLS CLUBS OF BINGHAMTON

FOR OFFICE USE ONLY	MEMBERSHIP # _____
Expiration/Renewal Date _____	
Previous Member? ___yes ___no	Fee Fully Paid ___yes ___no
Membership Fee: \$65.00 (ages 5-18)	Receipt#/CK # _____ Taken By: _____

PLEASE COMPLETE **ALL** FOUR SECTIONS:

SECTION 1:

CHILDS FIRST NAME _____ M.I. _____ LAST NAME _____

BIRTH DATE _____ AGE _____ SEX _____ MALE _____ FEMALE

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

Member at another Boys & Girls Club ___yes ___no

What City & State if yes _____

****MY CHILD (age 11+) IS ALLOWED TO WALK HOME:** YES NO (please circle one)
(Main Unit Only, Not Applicable for Fun Club)

****Ages 5-10** provide list of people allowed to pick up child:
(Main Unit Only, Not Applicable for Fun Club)

SECTION 2:

FATHER'S NAME _____

Father employed at _____ Work Phone # _____

MOTHER'S NAME _____

Mother employed at _____ Work Phone # _____

HOME PHONE # _____ PARENT CELL(S) _____

Email address: _____

EMERGENCY NAME (If parent cannot be reached) _____

EMERGENCY CONTACT PHONE # _____ CELL# _____

RELATIONSHIP _____

SECTION 3:

Name of school: _____

Current teacher: _____ Grade: _____

Do you receive Free or Reduced School Lunch? ____yes ____ no

ETHNICITY (select only one):

_____ Hispanic or Latino _____ Not Hispanic or Latino

RACE (select one or more):

_____ American Indian or Alaska Native _____ Asian

_____ Black or African American _____ White

_____ Native Hawaiian or Other Pacific Islander

Is applicant and/or any household member an employee for the City of Binghamton: ___ Yes ___ No

Female Head of Household: ___ Yes ___ No No. of family members currently employed: ___

Family Income (please circle):

No. of family members living in household	Level 1	Level 2	Level 3
1	Up to \$13,750	\$13,751 - \$22,900	\$22,901 - \$36,600
2	Up to \$15,930	\$15,931 - \$26,150	\$26,151 - \$41,800
3	Up to \$20,090	\$20,091 - \$29,400	\$29,401 - \$47,050
4	Up to \$24,250	\$24,251 - \$32,650	\$32,651 - \$52,250
5	Up to \$28,410	\$28,411 - \$35,300	\$35,301 - \$56,450
6	Up to \$32,570	\$32,571 - \$37,900	\$37,901 - \$60,650
7	Up to \$36,730	\$36,731 - \$40,500	\$40,501 - \$64,800
8+	Up to \$40,890	\$40,891 - \$43,100	\$43,101 - \$69,000

SECTION 4:

IMMUNIZATION- Has your child had immunizations? ____yes ____no

Do you have health/accident insurance? ____yes ____no Policy # _____

***If no, no sports allowed until Health Insurance obtained.**

Does your child have any medical/health problems? ____yes ____no

If yes, please explain (Please include any allergies that your child has):

Please read & sign below:

I give my child permission to participate in the Boys & Girls Clubs of Binghamton programs. In the event that I cannot be reached in an emergency, the Boys & Girls Club authorities may take such measures as they deem appropriate and shall notify me as soon as possible. In addition, I hereby give permission for securing at the expense of the undersigned, appropriate medical treatment. This will also include releasing my child for any treatment necessary in the emergency room of an accredited hospital by emergency room staff or doctor they would call in for emergency room treatment. I give the Boys & Girls Clubs of Binghamton permission to allow my child to be interviewed, filmed, and/or photographed by any television station, radio station, newspaper or other media for the purpose of the Boys & Girls Clubs of Binghamton as well as the photographing of report cards due to the collection of quantitative data regarding grant and donor requests.

PARENT/GUARDIAN SIGNATURE _____ DATE _____