

Boys & Girls Clubs of Central Pennsylvania, Inc.

MEMBERSHIP APPLICATION

ANGINO CLUBHOUSE 1227 Berryhill Street Harrisburg, PA 17104 Mark Hawthorne, Unit Director 717-234-3268	JOHN N. HALL CLUBHOUSE 1700 Hanover Street Harrisburg, PA 17104 717-232-1700	CUMBERLAND ROAD CLUBHOUSE Club Without Walls Project @ Downey School 1313 Monroe Street Harrisburg, PA 17104 717-514-2580
Club Hours Winter: Monday thru Friday 2-30-9:00 pm Summer: Monday thru Friday 9:00-5:00 pm	Annual Membership Fee \$10.00	PREP: 6-9 yrs CADETS: 10-12 yrs JUNIORS: 13-15 yrs. SENIORS: 16-18 yrs

Unit Name: _____ Membership # _____

First Name: _____ Middle: _____ Last: _____

Nickname: _____

Address: _____ At this Address Since: _____

City: _____ State: _____ Zip: _____ In Area Since: _____

Telephone: _____ Birth Date: _____ Childs SSN: _____

Ethnicity: _____ Gender: Male Female

School Information:

Current School: _____ Current Grade: _____ Current GPA: _____

Current Teacher: _____ Food Program: _____

Medical Information:

Doctor Name: _____ Doctor Phone: _____

Permission for Doctor/Hospital: Yes No

Does your family have health and/or accident insurance: Yes No

Insurance Carrier: _____

Policy #: _____ Group#: _____

Date Health Info received: _____

Serious Health Problems: Yes No Date Medical Info Received: _____

General:

Birth Certificate on File: Yes No Birth City: _____ Birth State/Country: _____

Parent Understood Signed Insurance Disclaimer and Permission Statement: Yes No

My child has permission to be used in public relations materials: Yes No

My child may participate in all Boys & Girls Club Yes No

activities in or adjacent to the club building:

Do You Belong to:

Boy Scouts or Girl Scouts School Club YMCA or YWCA Church Group

Religion: _____ Other: _____

Will you attend club: (check one)

Year-around Only during School Year
 Only during Holidays or Summer

Do you have a job: (check one)

None
 Summer Part-time Year-around Part-time
 Summer Full-time Year-around Full-time

How long a Member in Years: _____

Club Member Since: _____

Reason(s) for joining: ___Fun ___Learning ___Sports ___Other: _____

Household:

Annual	\$0 - \$5000 _____	\$30,001 - \$35,000 _____	\$60,001 - \$65,000 _____
Gross	\$5001 - \$10,000 _____	\$35,001 - \$40,000 _____	\$65,001 - \$70,000 _____
Household	\$10,001 - \$15,000 _____	\$40,001 - \$45,000 _____	\$70,001 - \$75,000 _____
Income:	\$15,001 - \$20,000 _____	\$45,001 - \$50,000 _____	\$75,001 - \$80,000 _____
	\$20,001 - \$25,000 _____	\$50,001 - \$55,000 _____	\$80,001 - \$85,000 _____
	\$25,001 - \$30,000 _____	\$55,001 - \$60,000 _____	\$85,001 - \$90,000+ _____

Do you live with your: ___Mom ___Step Mom ___Dad ___Step Dad ___Grandparent ___Other: _____

Is there a Member of the Household 65 years old or Older: ___Yes ___No

Is there a Member of the Household Handicapped: ___Yes ___No

Current Head of Household: ___Female ___Male

Current Housing Area: _____

Current Single Parent: ___Yes ___No Current Number in Household: _____

Number of Brothers: _____ Ages: _____ Number of Sisters: _____ Ages: _____

Parent/Guardian: _____ Emergency: _____ Person Authorized to Pickup Child: _____ Name: _____ Employer: _____ Occupation: _____ Address H: _____ Address W: _____ SSN: _____ DOB: _____ Relationship: _____ Phone: _____ Type: _____ Phone: _____ Type: _____ Phone: _____ Type: _____ Email: _____	Parent/Guardian: _____ Emergency: _____ Person Authorized to Pickup Child: _____ Name: _____ Employer: _____ Occupation: _____ Address H: _____ Address W: _____ SSN: _____ DOB: _____ Relationship: _____ Phone: _____ Type: _____ Phone: _____ Type: _____ Phone: _____ Type: _____ Email: _____
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Physical:

Eye Color: _____ Hair Color: _____ Skin Color/Features: _____

Height: _____ Weight: _____

Disclaimer: The Boys & Girls Club of Central PA is not responsible or liable in any way in the event of harm or injury occurring to the child. It is agreed that the parent or guardian will not hold Boys & Girls Club of Central PA responsible for the welfare or whereabouts of the child. If the Parent or Guardian does file a complaint against the Club the Parent or Guardian agrees to pay for Boys & Girls Club of Central PA legal fees.

Parents Signature: _____ Childs Signature: _____

OFFICE USE ONLY Membership#: _____ Locker#: _____

Entry Date: _____ Expiration Date: _____ Status: _____

Type: _____ New or Renewal Member: _____ Processed by: _____

