

# Boys & Girls Club Registration Form



**BOYS & GIRLS CLUBS**  
OF THE CORRIDOR  
MARION • CEDAR RAPIDS • IOWA CITY

## Busse Unit Summer Camp – Pilot Program

The Busse Unit extended club membership program costs \$190 per child per week plus a \$12 membership fee due the first week of club, and \$190 per child per week on a weekly basis thereafter. Program begins Monday, June 15<sup>th</sup> and ends Friday, August 14<sup>th</sup>. Club will be closed Monday, June 29<sup>th</sup> – Friday, July 3<sup>rd</sup>.

This program is available to youth ages 6-18 (must be at least 6 years old by time of registration).

Summer Camp Extended Membership hours will be 7:30 am – 5:30 pm.

Attendance is required 4 days a week.

Membership forms can be completed electronically and emailed to [sbrown@inmyclub.org](mailto:sbrown@inmyclub.org), or in person by visiting our office located at 420 6<sup>th</sup> St. SE, Suite 240, Cedar Rapids, IA 52401.

## MEMBER INFORMATION

### CHILDS NAME:

Preferred Name:

Pronouns:

Shirt Size:

## HOME ADDRESS

| Date of Birth | Age | Gender | Grade | School |
|---------------|-----|--------|-------|--------|
|               |     |        |       |        |

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## RACIAL IDENTITY

(Check all that apply)

- American Indian/Alaska Native    Asian    Black/African American    Middle Eastern/North African  
 Multiracial    Native Hawaiian/Other Pacific Islander    White    Other

**Ethnicity:**

- Hispanic/Latino

## PARENT/GUARDIAN INFORMATION

| First/Last Name | Mobile Phone | Work Phone | Email |
|-----------------|--------------|------------|-------|
|                 |              |            |       |
|                 |              |            |       |

## EMERGENCY CONTACT INFORMATION

| First Name | Last Name | Default Phone | Relationship | Can Pick Up  |
|------------|-----------|---------------|--------------|--|
|            |           |               |              | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|            |           |               |              | <input type="checkbox"/> Yes <input type="checkbox"/> No |

# Boys & Girls Club Registration Form

## MEDICAL INFORMATION

| Insurance Company | Physician Name | Physician Phone | Hospital Name | Hospital Name |
|-------------------|----------------|-----------------|---------------|---------------|
|                   |                |                 |               |               |

|                               |  |  |
|-------------------------------|--|--|
| Is on Medication:             | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| Allergies:                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| Diagnosed Medical Conditions: | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| Using EpiPen:                 | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| Using Inhaler:                | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |

## FAMILY/HOUSEHOLD INFORMATION

|                                  |  |
|----------------------------------|--|
| Household Composition:           | <input type="checkbox"/> Self (emancipated/18) <input type="checkbox"/> Parents <input type="checkbox"/> Mother Only <input type="checkbox"/> Father Only<br><input type="checkbox"/> Grandparent <input type="checkbox"/> Grandparents <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Foster Care<br><input type="checkbox"/> Joint Custody |
| Number of Adults in Household:   |  |
| Number of Youth in Household:    |  |
| Household Income:                |  |
| Qualifies for Reduced Fee Lunch: | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| Qualifies for Free Lunch:        | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| Active Military:                 | <input type="checkbox"/> Yes <input type="checkbox"/> No   |

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## Internet Waiver:

By signing my child up for Boys & Girls Club, I understand that I give my child permission to use the internet while at BGCC or any event sponsored by BGCC. I understand that internet use is monitored and is used for educational purposes only.

## Talent Release:

By signing my child up for Boys & Girls Club, I understand that I give permission to allow photographs & video to be taken of my child while at BGCC or any event sponsored by BGCC. I understand that these photos & videos may be used for marketing, recruitment, or advertising deemed appropriate or necessary by BGCC and I will be offered no compensation for the images used of my child.

## Transportation Waiver:

By signing my child up for Boys & Girls Club, I understand that I give my child permission to be transported in the BGCC vehicles. I will not hold the BGCC or any of its employees responsible for accident or injury that may occur because of being transported in the vehicles.

**Completion of this registration form does not guarantee membership at the Club. Once submitted, your information will be placed on our waitlists, and a Unit Director will contact you when space becomes available.**

## Payment Information:

### Bank:

Account Number: \_\_\_\_\_ Routing Number: \_\_\_\_\_

### Credit Card:

Name (as it appears on card): \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Month/Year: \_\_\_\_\_ / \_\_\_\_\_

CSV (3 digit code on back of card): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_