

# GREAT FUTURES START **HERE.**

Membership fee is  
\$5.00 / year



More info:  
[www.bgcmaine.org](http://www.bgcmaine.org)

## MEMBERSHIP APPLICATION

☐ PORTLAND CLUB    ☐ SOUTH PORTLAND CLUB    ☐ AUBURN/LEWISTON CLUB  
☐ RIVERTON PARK    ☐ SAGAMORE VILLAGE

Name \_\_\_\_\_  
(first) (middle) (last) (nickname)

Parent/guardian (lives with) \_\_\_\_\_ Home Phone# \_\_\_\_\_ Work Phone# \_\_\_\_\_

Home Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

**EMERGENCY CONTACT** (if parent/guardian cannot be reached) Name \_\_\_\_\_ Emergency Phone # \_\_\_\_\_

☐ NEW MEMBER    ☐ RENEWING MEMBER    Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_    Place of Birth (State/Country): \_\_\_\_\_  
(Month) (Day) (Year)

Male \_\_\_\_\_ Female \_\_\_\_\_ Parent a member of this club before? YES / NO    Name of School \_\_\_\_\_ Grade \_\_\_\_\_

The following information is necessary for our records and funders. Answers are confidential, and your cooperation is necessary and appreciated.

Ethnicity: ☐ African American    ☐ Caucasian    ☐ Asian    ☐ Hispanic    ☐ Native American    ☐ Middle East Indian    ☐ Multi-Racial

Do you receive free or reduced school lunch? YES / NO    # Brothers \_\_\_\_\_ # Sisters \_\_\_\_\_ How many people live in your house? \_\_\_\_\_

Do you live with your (check one or more):    Mother \_\_\_\_\_    Father \_\_\_\_\_    Grandparent \_\_\_\_\_    Guardian \_\_\_\_\_

Mother's Name \_\_\_\_\_ Work Phone# \_\_\_\_\_ Employer \_\_\_\_\_

Father's Name \_\_\_\_\_ Work Phone# \_\_\_\_\_ Employer \_\_\_\_\_

Guardian or Grandparent's Name \_\_\_\_\_ Work Phone# \_\_\_\_\_ Employer \_\_\_\_\_

Describe any MEDICAL CONDITIONS (allergies, etc.). Please list any current medications used by the child. \_\_\_\_\_

Preferred hospital or clinic: \_\_\_\_\_ Phone # \_\_\_\_\_

I wish to become a member of Boys & Girls Clubs of Southern Maine. I promise to take care of my Club and its property, to allow no other boy or girl to have or use my card and to be loyal to my Club. If at any time I am suspended from my Clubhouse, I will give back my card and will not ask for any return of dues paid by me.

APPLICANT'S SIGNATURE \_\_\_\_\_ Date: \_\_\_\_\_

I hereby give my permission for my child to become a member of Boys & Girls Clubs of Southern Maine. I understand that Boys & Girls Clubs and its personnel are not responsible for personal injury or loss of property. I hereby give permission to Boys & Girls Clubs of Southern Maine to secure proper treatment for my child in case of emergency.

PARENT / GUARDIAN SIGNATURE \_\_\_\_\_ Date: \_\_\_\_\_

### Talent / Media Release (optional)

I grant Boys & Girls Clubs of Southern Maine the right and permission to copyright and/or broadcast pictures, portraits or such images, pictures and/or portraits in which my child may be included, for advertising, news, promotion, public service or any other lawful purpose on any broadcasting, cable or publication media. I waive any rights that I may have to inspect and/or approve the finished product or the use to which it may be applied.

I release, discharge and agree to hold Boys & Girls Clubs of Southern Maine harmless from any liability that may arise by virtue of any artistic or other distortion and/or alteration that may occur in the finished product.

Print Name \_\_\_\_\_ Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_