



MARTHA'S VINEYARD BOYS & GIRLS CLUB

MEMBERSHIP #
STAFF ISSUED

44 Robinson Road, PO Box 654, Edgartown, MA 02539 ♦ (P) 508-627-3303 ♦ (F) 508-627-3372 ♦ bgclub@vineyard.net ♦ www.mvbgclub.org

MEMBERSHIP REGISTRATION FORM

Membership Period: 9/1/2010 to 8/31/2011

Membership Dues: \$20.00

MEMBER (CHILD) INFORMATION :

First Name: _____ Last Name: _____ Gender: Female Male

Birth Date: ____/____/____ Grade: _____ School: _____

Medications, Activity Restrictions, and/or Comments: _____

Race/Ethnicity (please circle one): African American Asian Brazilian Caucasian Multi-Racial Native American
(for statistical purposes only)

PARENT/GUARDIAN INFORMATION: (please check the MEMBER'S PRIMARY ADDRESS)

First Name: _____ Last Name: _____

Mailing Address: _____
PO Box / Street Town State Zip

Home Phone: _____ Mobile Phone: _____ Email: _____

Employer: _____ Work Phone: _____

First Name: _____ Last Name: _____

Mailing Address: _____
PO Box / Street Town State Zip

Home Phone: _____ Mobile Phone: _____ Email: _____

Employer: _____ Work Phone: _____

EMERGENCY CONTACT INFORMATION: (please specify someone other than the listed Parents/Guardians)

First Name: _____ Last Name: _____ Relationship to Member: _____

Home Phone: _____ Mobile Phone: _____ Work Phone: _____

By signing below I attest that this application is factual and complete to the best of my ability. I give my consent for photographs, audio recordings, and video recordings of or produced by my child to be used by the Martha's Vineyard Boys & Girls Club for promotional purposes. In the event of injury, or should emergency care be required and I cannot be reached, I authorize the staff of the Martha's Vineyard Boys & Girls Club to sign for emergency medical attention for my child. I also acknowledge that I have read, understand, and reviewed the Martha's Vineyard Boys & Girls Club Discipline Policy with my child.

Signature of Parent/Guardian

Date

Signature of Member

*** FOR OFFICE USE ONLY ***

Amount Paid: _____ Cash or Check # _____ Registration Date: _____ Staff Initial: _____

2010-2011 2010-2011 2010-2011 2010-2011 2010-2011 2010-2011 2010-2011 2010-2011