



**BOYS & GIRLS CLUBS**  
of Cedar Rapids

## Registration Form

Please Print

Membership fee of \$12.00 per year; if you need assistance please contact your Unit Director

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

### PARENT/GUARDIAN INFORMATION

Child lives with: Both Parents      Single Parent      Parent & Step-parent  
                                 Grandparent(s)      Foster Parent      Other: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ E-Mail \_\_\_\_\_

### CHILD INFORMATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Sex: M F

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

**Please circle the following (for scholarship, funding & grant purposes only)**

CHILD RACE: African American/Black    American Indian/Alaskan Native    Caucasian/White  
                         Latino    Asian    Native Hawaiian or Pacific Islander    Other: \_\_\_\_\_

Are you Hispanic \_\_\_\_\_?

FAMILY INCOME: \$0-\$6,999      \$7,000-\$14,999      \$15,000-\$23,999  
                                 \$24,000-\$39,999      \$40,000 +

Number of people in your family \_\_\_\_\_

Is your child on Government Free School Lunch Program: Yes or No

Is your child on Government Reduced School Lunch Program: Yes or No

**Please check the following**

**Power Hour Waiver:** I allow Boys & Girls Club staff to support my child in their education by providing homework help & tutoring assistance. I also allow communicating with teachers and the school which allows the Club to receive information such as grades, ITBS, information from other Education Enrichment programs, office referrals, days absent or tardy from school which helps keep track of the members progress while attending the Boys & Girls Clubs of Cedar Rapids or any event sponsored by the Boys & Girls Clubs of Cedar Rapids.

Yes  No

**Please provide us with your child's Power School Number:** \_\_\_\_\_

**Please allow us access to child's report card: Yes or No**

**Internet Waiver:** I allow my child to use the internet while at the Boys & Girls Clubs of Cedar Rapids or any event sponsored by the Boys & Girls Clubs of Cedar Rapids. I understand that internet use is monitored and is used for educational and recreational purposes only.

Yes  No

**Talent Release:** I give my permission to allow photographs & video to be taken of my child while at the Boys & Girls Clubs of Cedar Rapids or any event sponsored by the Boys & Girls Clubs of Cedar Rapids. I understand that these photos & videos may be used for marketing, recruitment or advertising deemed appropriate or necessary by the Boys & Girls Clubs of Cedar Rapids and I will be offered no compensation for the images used of my child.

Yes  No

**Program Waiver:** I give my child permission to participate in ALL programs offered by the Boys & Girls Clubs of Cedar Rapids or any event sponsored by the Boys & Girls Clubs of Cedar Rapids including: Art, Education, Sports & Physical, Recreation, and Prevention Programs.

Yes  No

**Van Release:** I give my child permission to be transported in the BGCCR sunshine van. I will not hold the Boys & Girls Clubs of Cedar Rapids or any of its employees responsible for any accident or injury that may occur as a result of being transported in the van.

Yes  No

**EMERGENCY CONTACT INFORMATION**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone (H): \_\_\_\_\_ Phone (C): \_\_\_\_\_

Can this person make medical decisions for your child?      YES      NO

List any information we need to be aware of  
(Medications, allergies, behavior concerns, custody orders, etc...)

\_\_\_\_\_

Parent signature: \_\_\_\_\_ Date: \_\_\_\_\_

**(Office Use Only):**

Requesting Scholarship: Yes or No      Half (\$6.00)      Full (\$12.00)      Volunteer

Director of Operations Approval: \_\_\_\_\_

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