



Mashkisibi

MEMBERSHIP APPLICATION

AGES 7-18

A 'renewal' form must be filled out annually

Membership is FREE

MEMBERSHIP INFORMATION

Last Name: _____

First Name: _____ Middle: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: (_____) _____ - _____

Email (parent): _____

Age: _____ Birth Date: __/__/____

Gender: _____ Male _____ Female, Other: _____

Race/Ethnicity (optional): American Indian or Alaska Native (___) Asian (___) African American (___)

Hispanic/Latino (___) Caucasian(____) Multi-Racial(____) Other: _____

Family:

Mother's /Guardian's Name: _____

Mother's /Guardian's Cell Phone #: (_____) _____

Mother's /Guardian's Work Phone #: (_____) _____ - _____ ext. #: _____

Father's/Guardian's Name: _____

Father's/Guardian's Cell Phone #: (_____) _____

Father's/Guardian's Work Phone #: (_____) _____ - _____ ext. #: _____

Name of Guardian (if different from mother or father): _____

Relationship to Guardian: _____

Guardian's Cell Phone #: (_____) _____

Guardian's Work Phone #: (_____) _____ - _____ ext. #: _____

Parent/Guardian E-mail Address: _____

Pick up Information: 1. _____ 2. _____

Not authorized to pick up: 1. _____ 2. _____

Authorized to Walk Home: _____ Yes _____ No

Please Indicate Medical Problems and/or Allergies:

Please Indicate Any Medication Presently Taking: _____

Physical or Mental Limitations: _____

General Information

Can Member Swim: _____ Yes _____ No

Are You a Previous Member of a Boys & Girls Club? _____ Yes _____ No

Previous Club Name: _____

Do You Live at a Public Housing Property? _____ Yes _____ No

School Attending _____

Grade _____

Confidential Information:

The following information is necessary for our records and the funding our organization receives.

The answers you provide are confidential. Your cooperation in providing this information is both appreciated and necessary.

Annual Household Income: \$ _____

Number of Family Members in the Household: _____

Circle all that Apply: SSDI SSI TANF Day Care Volunteer Food Stamps

General Assistance Free or Reduced-Price School Lunch Teen Parent Veteran Compensation

Child's Family Living Setting: Both Parents (____) Mother Only (____) Father Only (____)

Foster Care(____) 1 Parent/1 step (____) 2 Parent Family (____) Grandparents (____)

Sister/Brother (____) Aunt/Uncle (____)

Is Parent Active Military? _____Yes _____No

The Mission of the Boys & Girls Club is to help youth develop the qualities needed to become responsible citizens and leaders. To achieve this, we offer a variety of program activities and support services designed to assist in educational, emotional, physical and social development to 7- to 18-year-olds, without regard to social, racial, ethnic or religious background.

Emergency Contacts

(Specify 2 people we can contact if there is no answer from parents/guardians, one must be local)

1. Name:

Phone Number:

2. Name:

Phone Number:

Parent Release

I, the parent/guardian of the minor child listed on this application, for ourselves, our heirs, executors and administrators, hereby release, waive, acquit and forever discharge the Boys & Girls Club of Bad River Band of Lake Superior Chippewa and Boys & Girls Clubs of America, their representatives, successors, insurers, assigns or any other person or entity associated with any of the above organizations such as staff, directors or volunteers, from all liability, claims, demands, or causes of action for any and all loss, damage, injury or death and any claim of damages resulting from use of facilities owned or controlled by the above organizations, or participation in activities of said organizations either at or away from the Club.

Medical Treatment

I give permission to the Bad River Band of Lake Superior Chippewa to seek emergency medical treatment for my minor child if I cannot be reached. I will be responsible for any/all costs of medical attention and treatment.

Data Collection

I give my permission to the Boys & Girls Club of Bad River Band of Lake Superior Chippewa to collect information via online or written surveys, questionnaires, interviews, and focus groups from the minor child listed on this application. All information received will be kept strictly confidential. Data gathered through these means will be summarized in the aggregate and will exclude all references to any individual responses. The aggregated results of these analyses may be shared with Club staff, Boys & Girls Clubs of America (BGCA), funders, Tribal Council, and other community stakeholders to evidence program effectiveness and/or Club impact on our members.

School Information

I give my permission to the Boys & Girls Club of Bad River Band of Lake Superior Chippewa and my child's School District to exchange information regarding the minor child listed on this application. The purpose of the exchange is to help both organizations do a better job of helping the student be successful in school, in the Boys & Girls Club and in life. This release is valid for one year and may be revoked at any time by contacting the School District or the Boys & Girls Club in writing.

Data Sharing

I understand that the Boys & Girls Club of Bad River Band of Lake Superior Chippewa may share information about the minor child listed on this application with Boys & Girls Clubs of America (BGCA) for research purposes and/or to evaluate the program's effectiveness. Information that will be disclosed to BGCA may include the information provided on this membership application form, information provided by the minor child's school or school district, and other information collected by Boys & Girls Club of Bad River Band of Lake Superior Chippewa, including data collected via surveys or questionnaires. All information provided to BGCA will be kept confidential.

Media Release

I, _____, grant permission to _____, to use my child's image (photographs and/or video) for use in Media publications including:(Check All That Apply) Videos Email Blasts Newsletters Website and/or Affiliates Other: _____

Technology

As a member of the Boys & Girls Club, your child will have access to the Internet. While precautions are being taken, it is possible she/he will access inappropriate sites. The Boys & Girls Club will have rules and consequences at the Club for such behavior; however, we will not be responsible for the consequences of such access.

Miscellaneous

I understand the Boys & Girls Club is not responsible for lost or stolen items. Parents and Club members are responsible for their own transportation to and from the Club. As a drop-in facility, we are not responsible for Club members' whereabouts.

I give permission for my child's picture, moving pictures, or any other graphic depiction or likeness, to be used by the Boys & Girls Club and its activities. I also understand the Club is not, nor does it claim to be, a licensed day care center. I have read the completed application and this form, understand the rules of the Boys & Girls Club, and request my child be admitted into membership.

I give my permission to the Boys & Girls Club of Bad River Band of Lake Superior Chippewa to share information about the minor child listed on this application with Boys & Girls Clubs of America (BGCA) for research purposes and/or to evaluate the program's effectiveness. Information that will be disclosed to BGCA may include the information provided on this membership application form, information provided by the minor child's school or school district, and other information collected by Boys & Girls Club of Bad River Band of Lake Superior Chippewa, including data collected via surveys or questionnaires. All information provided to BGCA will be kept confidential.

_____ Parent / Guardian Signature

_____ Club Member's Signature

Date: ____/____/____

FOR PARENTS/GUARDIANS

Assumption of the Risk and Waiver of Liability Relating to Coronavirus/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is **extremely contagious** and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people.

Boys & Girls Clubs of Bad River Band of Lake Superior Chippewa (“Club”) has put in place preventative measures to reduce the spread of COVID-19; however, the Club **cannot guarantee** that you or your child(ren) will not become infected with COVID-19. Further, **attending the Club could increase** your risk and your child(ren)’s risk of contracting COVID-19.

By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending the Club and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Club may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Club employees, volunteers, and program participants and their families.

I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, and death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)’s attendance at the Club or participation in Club programming (“Claims”).

On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless the Club, its employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs, or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of the Club, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any Club program.

Signature of Parent/Guardian _____

Date: _____

Name of Parent/Guardian Name of Club Participant(s) _____