

**MEMBERSHIP APPLICATION**  
**Boys & Girls Clubs of Greater San Diego**

Please complete a separate Boys & Girls Clubs of Greater San Diego ("Club") membership application for each child. This application applies to the "Child" identified below:

**Child's First Name:** \_\_\_\_\_ **Middle:** \_\_\_\_\_ **Last:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Membership Status:**     New                       Renewal                       Transfer from another location: \_\_\_\_\_

**How did you hear about the Club?**     School Flyer     Drive By     Newspaper     Friend: \_\_\_\_\_

Please Print Name

**Medical Information:**

Special Information (e.g., allergies, medical conditions, etc.): \_\_\_\_\_

Does Child take any medications? \_\_\_\_\_ If yes, which: \_\_\_\_\_

The following information is for statistical purposes and may be used to help secure funding for the Club. The information will not be used to determine eligibility for membership. Answers will be kept confidential to the extent possible. Please answer all questions.

**Child's Gender:**     M     F     Other: \_\_\_\_\_                      **Birth Date:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Grade (2026-27 SY):** \_\_\_\_\_

**Ethnic Background:**     Caucasian     African American     Hispanic     Asian     Native American     Other: \_\_\_\_\_

**Lives with:**     Both Parents/Guardians     Parent/Guardian 1 only     Parent/Guardian 2 only     Other: \_\_\_\_\_

**Annual Household Income:** \_\_\_\_\_ **Total Number of Individuals Living in Household:** \_\_\_\_\_

**Qualify for:**     FREE Lunch     Reduced Price Lunch

**Parent(s)/Guardian(s) member of the U.S. Military?**     Yes     No    **If yes, which branch:** \_\_\_\_\_

**Parent(s)/Guardian(s):**

**Parent/Guardian 1:** \_\_\_\_\_ **Home #:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Work #:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Authorized to Pick-up Child:**     Yes     No

**Parent/Guardian 2:** \_\_\_\_\_ **Home #:** \_\_\_\_\_ **Cell #:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Work #:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Authorized to Pick-up Child:**     Yes     No

**Emergency Contact(s):** (additional contacts if Parent(s)/Guardian(s) cannot be reached)

**Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Authorized to Pick-up Child:**     Yes     No

**Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Authorized to Pick-up Child:**     Yes     No

**Other(s) Authorized to Pick-up Child:**

Please note: Unless otherwise indicated above, Parent(s)/Guardian(s) and Emergency Contact(s) are authorized to pick-up Child from the Club. You only need to list any additional people below who are also authorized to pick-up Child.

**Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

**Authorization to Leave Premises Unescorted:** (if applicable)

Please note: If no box is checked below, only the Parent(s)/Guardian(s), Emergency Contact(s) and Other(s) Authorized, as indicated above, will be authorized to pick-up Child from the Club. The Child will not be permitted to check themselves out of the Club or leave with another youth.

- Child is 12 years or older and has permission to check themselves out of the Club.
- Child is 12 years or older but does not have permission to check themselves out of the Club.
- Child is younger than 12 years old, and has permission to leave the Club with the following youth who is related to Child and is 12 years or older: Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Acknowledgements:**

By signing below and in consideration of Child's membership in the Club and participation in its programs, I, on behalf of myself and Child, acknowledge and agree to the following, and I represent and warrant that I have authority to do so.

I grant the Club the perpetual and irrevocable right, permission and license to use Child's name, image, voice, likeness and/or words through photography, film, recordings, or other electronic means, storage devices or files ("Recordings"), to edit such Recordings at the Club's discretion, and to use, reproduce, display, distribute and/or make derivative works for any purpose the Club may care to use them, including without limitation for grants, funding and/or promotional purposes, and through all media, including without limitation presentations, displays, brochures and other materials, and the internet.

I understand the Club has adopted a Safe Passage Policy that prohibits Child from coming and going as they please. I understand that once Child has entered the Club building, they will not be allowed to leave until a parent/guardian or other authorized adult/youth as indicated above arrives to retrieve them. I understand that the Club and its staff cannot physically restrain children who insist on leaving without permission.

I have read and agree that Child and I will abide by the policies in the Parent Handbook. I understand that failure to abide by the policies in the Parent Handbook may result in the removal of Child from Club programs.

I acknowledge that (i) I have read this document, (ii) I have inspected the facilities and equipment, (iii) I accept them as being safe and reasonably suited for the purposes intended, and (iv) I voluntarily sign this document. However, I also acknowledge that children at the Club are subjected to dangers that are inherent to participation in the Club's activities, and thus impossible for the Club or its staff and members to fully control or eliminate. I am fully aware of such risks and accept these risks on behalf of myself and Child. I voluntarily release, discharge, waive and relinquish any and all claims or actions that I, Child or Child's other parent(s)/guardian(s) may have against the Club, its directors, officers, employees, volunteers, governing board, agents, representatives (collectively "Releasees") including any and all claims or liability for any loss or damage to property, or bodily injury, emotional distress, and/or death arising from or in any way connected to the Club or Club-related activities, whether caused by Releasees or a third-party by any person associated directly or indirectly with the Club, and also including but not limited to any claims or actions arising from negligence (the "Released Claims"). I do so for myself, Child, and Child's other parent(s)/guardian(s), and their heirs, executors, administrators and assigns, whether any said causes of action shall arise by the negligence of the Releasees or otherwise.

I also agree to defend, indemnify and hold harmless the Releasees from such Released Claims, including any and all related costs or expenses, attorney fees and other litigation costs, liabilities, settlements, and/or judgments. The releases and indemnity set forth in this paragraph and the previous paragraph shall survive the expiration or termination of this agreement or Child's membership in the Club and/or participation in its programs.

In the event Child becomes injured, suffers from illness, or requires medical treatment, I authorize the Club's designee to proceed at its discretion to take measures it deems appropriate, including without limitation consent to x-ray examination, anesthetic, medical, dental, surgical diagnosis, treatment, and/or hospital care. I understand that the Club is not responsible for costs incurred for such care.

I intend this document to be as broad and inclusive as is permitted by the laws of the state of California; if any portion hereof is held invalid, I agree that the balance shall continue in full force and effect.

**Signature of Parent/Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

FOR OFFICE USE ONLY		
Membership #: _____		
Membership paid: _____	Receipt #: _____	New/Renewal Member: _____
Visions Entry Date: _____	Expiration Date: _____	Processed by: _____