



Color Group: _____

Enrollment Fee/Receipt # _____

2010 M.L.K. Membership Application

Please complete this form and return, if additional information is needed, please call 936.291.6054.

NEW DUES are \$20.00 per year/per child ages 6 to 13. HISD Early Release Day fee is \$3.00 per/child. Staff Development/Parent-Teacher Conference Day fee is \$6.00 per/child. Dues are for programming purposes ONLY.

Date		Renewal		New Member	
Please fill in appropriate information:					
Unit Location: MLK Neighborhood Recreation Center			Program: Afterschool		
Child's Information					
Name:		Sex: Male / Female		Age:	
Address:				Ethnicity:	
City:		State: TX	Zip:	Phone #:	
School:			Grade:	Birth Date:	
Mother/Guardian:			Work #:		
Father/Guardian:			Work #:		
Physician Name:			Phone #:		
Special Needs (allergies, illness, injuries, etc)					
Emergency Contacts					
Name		Contact #		Relation to Child	
Siblings & Grade/School					
Name:		Name:		Name:	
School/Grade:		School/Grade:		School/Grade:	
Additional Authorization Information (Circle ALL that Apply)					
In the event that I, parent/guardian, can NOT be reached to make arrangements for emergency medical attention, I authorize the BGCWC staff person in charge to take my child to _____ hospital to be seen by _____ physician or emergency room physicians.					
Yes / No	I understand and agree that the BGCWC cannot and will not administer prescriptions or over the counter medications of any kind to my child.				
Yes / No	I understand and agree that the BGCWC does not provide medical insurance for my child.				
Yes / No	I understand and agree that the BGCWC is not responsible or legally liable for any personal property losses or for any bodily injuries incurred and suffered by the applicant on any BGCWC property or in connection with any activities at any of its facilities, or while engaged in any BGCWC activities away from the BGCWC.				
Yes / No	I understand and agree that the BGCWC MLK Neighborhood Recreation Site is NOT regulated as a licensed daycare by the State of Texas and has an Open Door Policy , which allows members to come and go at will.				
Yes / No	My child has permission to participate in the computer program which uses educational internet programs.				
Yes / No	I give permission to BGCWC to photograph my child during programming for the sole purpose of marketing for BGCWC.				
Yes / No	I acknowledge receipt of the operational policies including discipline and guidance procedures.				
Yes / No	I have completed the HISD Transportation Form and returned it to my child's school.				
Signature					
Parent/Guardian			Date		
Anticipated Start Date		TDC Employee:	(circle one)	YES	NO
OFFICE USE ONLY:					
Date Received:		Database Entered:		Entered By:	

There are ONLY 100 slots available. First Come, First Served.

Partnership with the City of Huntsville – Community Services Department

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