



Boys & Girls Clubs
A good place to be

BOYS AND GIRLS CLUB
MEMBERSHIP APPLICATION FORM

INCOMPLETE FORMS WILL NOT BE ACCEPTED

Club Locations: _____

Member's Name: _____ Membership # _____

Male: Female: Date of Birth: (M) ____ (D) ____ (Y) _____ Age: _____

School Attending: _____

Health Card: _____ (without # participant cannot be admitted)

Doctor's Name: _____ Phone # (____) _____

Allergies/Special Needs: _____

Parent/Guardian Name: _____

Address: _____

Apt.: _____ Postal Code _____ Email: _____

Home # (____) _____ Business # (____) _____

Emergency Contact Name: _____ Phone # (____) _____

The following questions are for Statistical Purposes only.

Member's Place of Birth – City: _____ Country: _____

Cultural Background: _____ Language Spoken: _____

Occupation of Mother: _____ Occupation of Father: _____

Parent/Guardian Consent:

This application is made with my approval and consent. Although I am sure that the West Scarborough Neighbourhood Community Centre (herein after called the Agency) and its Partner Agencies take all necessary precautions to ensure the health and safety of my child/children, I agree to indemnify and save harmless both during and following the term of this agreement the West Scarborough Neighbourhood Community Centre, its Partner agencies and the corporation of the City of Toronto from all losses, damages, claims or other proceedings in any manner based upon, or attributable to anything done or omitted to be done by the Agency its Partner Agencies or the Corporation of the City of Toronto in connection with any services, trips or activities, both on site and off, provided by the Agency throughout the term of the membership. I have been given a copy of and have read the Conditions of Membership Form. Refunds will only be distributed for programs or activities cancelled by the Agency.

I, _____, give the West Scarborough Neighbourhood Community Centre permission to photograph, videotape, make an audiotape, film and or interview in West Scarborough Neighbourhood Community Centre publications / print material, including marketing and promotional materials, and the West Scarborough Neighbourhood Community Centre.

Parent/Guardian Signature: _____ Date: _____

I wish to become a member of the Boys and Girls Club of West Scarborough Parent Committee YES NO