



Woodall Public School - After School Program

CLUB MEMBER INFORMATION

First Name		_MI	Last Name	e				
Address		City		St	ate	Zip		
DOB	Age	Gender Male / Fe	emale H	ome Phone				
Ethnicity: African American / As	ian / Hispanic / Latino	/ Native American	/ Caucasia	n / Other	Single Pa	arent Hous	sehold: Y / N	
Current Teacher	C	urrent School			2	1-22 Scho	ol Grade	_
	PA	RENT/GUARDIA	N INFORM <i>E</i>	ATION				
Relationship	First Name_			La	st Name			
Employer		Wo	rk #			_Cell #		
Relationship	First Name_			La	st Name_			
Employer		Wo	rk #			_ Cell # _		
		*EMERGENCY	CONTACT	-				
Relationship_	First I ast Nar	•			-lome/Mor	k/Cell		
•								
Relationship* Please include emergency contact		ne		·	nome/vvor	k/Cell		
Which Hospital do you use?	Tahlequ	ah City Hasting	gs					
LODANT DEDMISSION FOR		DISCLA	<u>IMER</u>					
I GRANT PERMISSION FOR: The child listed on this form to be								may
administer first-aid or emergend	cy treatment procedure	es to my child, which	cn may incit	ide admissi	on to a nos		(Please Initial)	
I UNDERSTAND THAT: Parents / Guardians are respon Boys & Girls Club of Tahlequah								
boys & oms oldb or ramequan	Tior Tarliequali i ublic	Octionis is respon	131016 101 103	s or their or	personary		(Please Initial)	
I UNDERSTAND THAT: Continual discipline problems of	ould result in removal o	of the program	(Please Init	tial)				
My child has permission to be My child has permission to re My child may participate in a	e used in public ma elease his/her grade	s to the program	ol program n director (f	only) Y / for after-sc	hool tutor		s) Y/ N	
PARENT / GUARDIAN SIGN	NATURE					DATE_		



Boys & Girls Club of Tahlequah

RELEASE OF LIABILITY

The undersigned releases and agrees to hold harmless the Board of Directors, the staff, the funders, Tahlequah Public Schools, the National Boys & Girls Clubs of America with whom the Boys & Girls Club of Tahlequah is affiliated, and the Southwestern Regional Office of Boys & Girls Clubs of America, from any liability, injury, damages, loss, accidents, delay or irregularity related to the undersigned individuals planned participation or involvement in the following project:

MISSION STATEMENT

To enable all young people, especially those who need us most, to reach their full potential as productive, caring, responsible citizens.

POWER HOUR: Boys & Girls Club of America requires the first hour to be an academic success program. Example: homework help, tutoring and high-yield learning activities.

This release covers all rights and actions of every kind, nature and description, which the undersigned ever had or will have. This release includes the undersigned, his heirs, representatives and assignees.

(Child's) Participants Signature:	
Parent / Legal Guardians Signature:	
Date: ********************************	*********
I give permission for my child to walk home each day from the After-School program staff will not be responsible for my child once he/she leaves the program site.	Program. I understand that The route my child will walk
PARENT/GUARDIAN SIGNATURE DATE _	

Revised: December 2018