Membership Information Form

BOYS & GIRLS CLUBS OF OAKLAND

First Name:_____ **Middle**:_____ **Last**: _____

Address:_____ **City**: _____**Zip**:_____

Home Phone:_____ **Cell**:_____

Age:_____ **Date of Birth**:_____ **Gender: Male ( ) Female ( )**   **Foster Child: Yes ( ) No ( )**

Ethnicity (Circle One): African American   Asian American   Caucasian   Latino   Native American Pacific Islander

Multi-Racial (please specify) _____ **Other (please specify)** _____

Emergency Contact Name:_____ **Relation:**_____ **Phone:**_____

School:_____ **Grade:**_____

Father's Name:_____ **Work Phone:**_____ **Cell Phone:**_____

Mother's Name:_____ **Work Phone:**_____ **Cell Phone:**_____

Guardian's Name:_____ **Work Phone:**_____ **Cell Phone:**_____

Parent/Guardian Email:_____ **Member's Email:**_____

Member Lives With (circle one) Both Parents Mother Father Sister Brother Grand Parents Guardian Other

Number of Brothers:_____ **Number of Sisters:**_____ **How many people live in your household?**_____

Hobbies:_____ **Can you swim?**_____

Health Plan: yes ( ) no ( ) If yes, name of plan _____

Medical Problems:_____ **Medication Taken:**_____

Circle all that apply: AFDC   SSDI   Day Car Voucher   General Assistance   School Lunch Program   Veteran

Total Household Income (optional):_____

Does your child have any medical or psychological problems that may affect his/her involvement in the Club?_____

Is your child taking any medications? _____ **If yes, please list:**_____

I have read the completed application and I understand the rule of Boys & Girls Clubs of Oakland and request my son/daughter be admitted into membership. I will attend the new member orientation and I will explain the rules to my son/daughter and agree that they will follow the rules of the Boys & Girls Clubs of Oakland to maintain membership. I give permission for the Club to obtain my child's grades from their school as needed. I also give my consent for photographs in which my son/daughter may appear in to be used by the Boys & Girls Clubs of Oakland for promotional use. I acknowledge and understand that the Boys & Girls Clubs of Oakland has an open door policy.

_____   _____
Parent Signature   **Date**   **Member Signature**   **Date**

Leonard J. Meltzer Branch	**Ossian E. Carr Branch**	**Anna Marie Whalen Branch**
920 24th Street	8530 International Blvd.	3300 High Street
Oakland, CA 94607	Oakland, CA 94621	Oakland, CA 94619
510-272-9929	510-638-1532	510-535-9461
Membership Fee:	Membership Fee:	Membership Fee:
School Period $15	School Period $20	School Period $25
Summer Period $30	Summer Period $40	Summer Period $50