



# Boys and Girls Club of the Bemidji Area

## Registration Form for the 2016 School Year Morning Program

**Member's Full Name:** \_\_\_\_\_

(Each youth needs a separate form)

**MORNING EMERGENCY CONTACTS:** (please write the best contacts for hours in the mornings on the selected dates)

Name: \_\_\_\_\_ Relation to Member: \_\_\_\_\_

Best Contact Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Name: \_\_\_\_\_ Relation to Member: \_\_\_\_\_

Best Contact Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Trips/Transportation** (Morning):

I give consent for my child to take part in field trips with the Boys and Girls Club of the Bemidji Area. This includes transportation in the Club van and/or walking with Club staff.

I do not give consent.

**ATTENTION:** Each of the date(s) you select will need to be paid **BEFORE** the program begins and returned with this form. To participate in the November 3<sup>rd</sup>/4<sup>th</sup> program, payment & form will be need to be turned in by **Friday, October 28<sup>th</sup>**.

**Please check the date(s) you would like your member to attend the Club morning program:**

- Thursday, November 3<sup>rd</sup>      \$20
- Friday, November 4<sup>th</sup>        \$20

(Separate forms are available for additional Fall 2016 dates)

**For office use only:**

Fee Received on: \_\_\_\_/\_\_\_\_/\_\_\_\_      Staff Initial: \_\_\_\_\_

Total Amount Received: \$ \_\_\_\_\_

Cash:     Check:  # \_\_\_\_\_

CCAP:

Current Member:  Yes     No

**\*\*If not current member you'll need to complete:**

Membership Form     Orientation     Member Fee

**Payment methods include cash or check.**

Please inquire at [kmork@paulbunyan.net](mailto:kmork@paulbunyan.net)

if you are interested in using  
Beltrami County Child Care Assistance Program.

Please indicate by signing below you acknowledge:

- I have read and completed the Boys & Girls Club of the Bemidji Area School Year Morning Program registration form.
- I understand the Club is requiring my family to pre-pay for the day(s) each of my children attends the morning program so that the Club can plan and staff the morning accordingly.
- I have indicated the specific day(s) my child is planning to be in attendance for morning programming.
- I understand I will not receive any refunds in the case my child does not attend one or more of the dates I have selected.
- I understand that I will not be able to transfer that payment to a different day(s).
- I understand that if my child is not already a member of the Boys & Girls Club of the Bemidji Area, I am responsible for signing him/her up as a member, by doing the following: complete a Club membership form, pay the \$25 membership fee, and attend the general new member orientation held each Monday at 5:00 pm.

\_\_\_\_\_  
PRINT Parent/Guardian Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**\*\*The Club will be closed for Thanksgiving & Christmas break, we will not be providing the morning program or afternoon programming during these times:**

**November 24<sup>th</sup>/25<sup>th</sup> & December 23<sup>rd</sup>-January 2<sup>nd</sup>. \*\***