



**BOYS & GIRLS CLUBS**  
OF GREATER OXNARD AND  
PORT HUENEME

Membership #: \_\_\_\_\_  
Expiration Date: \_\_\_/\_\_\_/\_\_\_  
New: \_\_\_\_\_  
Renewal: \_\_\_\_\_

**MEMBERSHIP APPLICATION:**

CLUB SITE: *(please check one)*

Martin V. Smith Youth Center     Port Hueneme     Harriet H. Samuelsson

Name: \_\_\_\_\_ Sex: (M) (F) Age: \_\_\_\_\_ Birth Date: \_\_\_/\_\_\_/\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Teachers Name: \_\_\_\_\_

Parent (Guardian) Name: \_\_\_\_\_ Phone #: (c) \_\_\_\_\_ (w) \_\_\_\_\_

Parent (Guardian) Name: \_\_\_\_\_ Phone #: (c) \_\_\_\_\_ (w) \_\_\_\_\_

Alternate Caregivers Name: \_\_\_\_\_ Phone #: (c) \_\_\_\_\_ (w) \_\_\_\_\_

**OTHER Emergency Contacts:**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

**MEDICAL INFORMATION:**

Please list any medical problems, allergies and/or current medications: \_\_\_\_\_

\_\_\_\_\_

Preferred Doctor: \_\_\_\_\_ Dr. Phone #: \_\_\_\_\_

Insurance Policy #: \_\_\_\_\_

**DO YOU THINK THE COMPANY YOU WORK FOR WOULD BE INTERESTED IN DONATING GOODS, SERVICES OR DOLLARS TO HELP ONE OF OUR PROGRAMS? IF SO, PLEASE COMPLETE THE FOLLOWING...**

Company: \_\_\_\_\_ Contact Person: \_\_\_\_\_ Phone #: \_\_\_\_\_

Please mention my name when contacting my company:  Yes  No

My company will accept request for: (Please select all that apply)

Discounts  Dollars  Products  Services

Other: \_\_\_\_\_

**HOW CAN YOU HELP OUT THE BOYS & GIRLS CLUBS?**

Are you interested in being a volunteer? If so, please indicate check one/or more of the following:

- |                                       |   |  |   |
|---------------------------------------|---|--|---|
| <input type="checkbox"/> Coach Sports | <input type="checkbox"/> Referee Sports | <input type="checkbox"/> Dance/Drama   | <input type="checkbox"/> Building Maintenance |
| <input type="checkbox"/> Office Help  | <input type="checkbox"/> Music          | <input type="checkbox"/> Ceramics      | <input type="checkbox"/> Arts n Crafts        |
| <input type="checkbox"/> Computer Lab | <input type="checkbox"/> Teen Center    | <input type="checkbox"/> Social Events | <input type="checkbox"/> Home Work Assistance |
| <input type="checkbox"/> Other: _____ |   |  |   |

**For the purposes of grants and surveys, please fill in the following information.  
This information is confidential and will not be shared with any other agency:**

Single Parents:  Yes  No Current Head of House Hold:  Male  Female  Both

Military Family:  Yes  No Lives on Military Base:  Yes  No Military Branch: \_\_\_\_\_

Is your family a part of a Housing Development:  Yes  No

**Child's Ethnicity:**  Hispanic or Latino  Non-Hispanic or Non-Latino

**Please indicate the Race:**

- |  |   |
|--|---|
| <input type="checkbox"/> White   | <input type="checkbox"/> Native Hawaiian/Other Pacific Islander   |
| <input type="checkbox"/> American Indian/Alaskan Native                            | <input type="checkbox"/> American Indian/Alaskan Native and White |
| <input type="checkbox"/> Asian   | <input type="checkbox"/> Asian and White                          |
| <input type="checkbox"/> Black/African American                                    | <input type="checkbox"/> Black/African American and White         |
| <input type="checkbox"/> American Indian/Alaskan Native and Black/African American |   |
| <input type="checkbox"/> Other Multi-Racial  |   |

Household Size	30% Median	50% Median	80% Median	> 80% Median
1	\$0 - \$19,050	\$19,051 - \$31,750	\$31,751 - \$50,750	\$50,751 or more
2	\$0 - \$21,800	\$21,801 - \$36,250	\$36,251 - \$58,000	\$58,001 or more
3	\$0 - \$24,500	\$24,501 - \$40,800	\$40,801 - \$65,250	\$65,251 or more
4	\$0 - \$27,200	\$27,201 - \$45,300	\$45,301 - \$72,500	\$72,501 or more
5	\$0 - \$29,400	\$29,401 - \$48,950	\$48,951 - \$78,300	\$78,301 or more
6	\$0 - \$32,570	\$32,571 - \$52,550	\$52,551 - \$84,100	\$84,101 or more
7	\$0 - \$36,730	\$36,731 - \$56,200	\$56,201 - \$89,900	\$89,901 or more
8	\$0 - \$40,890	\$40,891 - \$59,800	\$59,801 - \$95,700	\$95,701 or more

**PARENTAL ACKNOWLEDGEMENT**

I understand that my child can enter and leave the Boys & Girls Clubs of Greater Oxnard and Port Hueneme (referred to as the Club) AT WILL, and that the Club is not a Day Care Facility and cannot give my child constant exclusion attention. I further understand that it is my responsibility to give my child instructions to stay and participate in Club activities. The Club provides staff in all areas of Club activities. I hereby give my permission for my child to participate in Club Programs. In consideration of this permission, I understand, hereby for and on behalf of said child, our heirs, executors, and administrators waive, release and forever discharge any and all rights and claims for damages which I may hereafter have against the Club and/or its assigns for any and all injuries or damages which may be sustained or suffered by said child in connection with or entry in an/or arising out of traveling to, participating in, or returning from said activity or event. In the event of an injury to my child and I cannot be contacted, I hereby give permission to a representative of the Boys & Girls Clubs of Greater Oxnard and Port Hueneme to authorize the medical doctor or hospital to administer any and all medical treatment to my child. I hereby give permission for my child to be used in public relations materials if the opportunity arises. I understand that membership to the Club is a privilege and should my child not be able to abide by all safety rules, the membership can be withdrawn for designated periods of times or revoked permanently. All fees to the Club will be forfeited during the withdrawal period and/or at the moment of membership revocation.

**PARENT/GUARDIAN SIGNATURE:** \_\_\_\_\_

**MEMBERSHIP ACKNOWLEDGEMENT**

I wish to become a member of the Boys & Girls Clubs of Greater Oxnard and Port Hueneme. I agree to obey the rules, be careful to prevent damage to the Club and the equipment, and most importantly to have fun. I also know if I am suspended from the Club for failure to obey rules, I understand that no dues will be returned to me.

**CLUB MEMBER SIGNATURE:** \_\_\_\_\_