

3333 Walnut Avenue
Post Office Box 1082
Coos Bay, OR 97420
(541) 267-6573



BOYS & GIRLS CLUB
of Southwestern Oregon

REGISTRATION FORM

Membership No. _____

www.great-futures.org

- SOCCER, FALL VOLLEYBALL SOFTBALL
- SOCCER, SPRING BASKETBALL AGES 6-14 (GRADES 1-9)
- TRACK & FIELD

Fee reductions will not be offered after the first week of registration. PAYMENT IN FULL is required at time of registration. All previous balances MUST be paid in full.



Scholarships and Fee Reductions are sponsored by BASA

Would you like to volunteer as a coach?
YES _____ NO _____

- ★ All sport participants must have a current, non-refundable membership.
- ★ Players will NOT be allowed to PRACTICE until registered and all fees are paid in full. Teams are filled on a first come first serve basis.
- ★ There will be no team switches after teams have been formed.
- ★ Most teams will be assigned geographically by schools.
- ★ Program refunds are subject to a \$5.00 service charge.

PLEASE PRINT PARTICIPANT REGISTRATION

Name: _____ Mailing Address: _____

Home Address: _____ Phone: _____ Emergency Phone: _____

Date of Birth: ____/____/____ Male ___ Female ___ School Presently Enrolled: _____ Grade: _____

If enrolled in Middle School/Jr.-Hi, Last Elementary School Attended: _____

Has child participated in Boys & Girls Club Program during the year? Yes ___ No ___

MEDICAL Does child have any Medical Problems? Yes ___ No ___ If yes, Please Explain: _____

_____/_____/_____ Child's Physician _____ Phone _____

PARENT INFORMATION

Father's Name: _____ Employer _____ Phone _____

Mother's Name: _____ Employer _____ Phone _____

E-Mail Address _____

REFUND POLICY A \$5.00 fee will be deducted for refunds. No refunds will be honored if a player has participated in a game. **100% Refund** will be given whenever a team cannot be formed due to lack of players or a player cannot be placed on a team. If a player drops from the program because of medical reasons prior to the first scheduled game – a full refund will be given only with the written authorization from the attending physician. **90% Refund:** If a refund application is filed with the Boys & Girls Club office prior to the registration deadline or the first scheduled practice. Application forms are available at the Boys & Girls Club office.

PERMISSION TO PLAY

As the parent or legal guardian of the child named above who is registered to participate in Boys & Girls Club activities for the current season, I hereby acknowledge to the Boys & Girls Club that I am not aware of any medical or other reason why my child should not be allowed to participate in Boys & Girls Club activities.

In the event of accidental injury incurred while participating in Boys & Girls Club activities, I authorize Boys & Girls Club representatives to secure medical care for my child in the event I cannot be reached. Acting on my own behalf and on the behalf of my child as his/her parent or as his/her guardian, I hereby release Boys & Girls Club and its agents, staff, representatives, directors, coaches and anyone else acting on behalf of Boys & Girls Club activities, from any and all liability for any injury or condition resulting from his/her participation in Boys & Girls Club activities.

I agree to reimburse the Boys & Girls Club at replacement cost for any uniform and/or protective equipment issued the child if said items are not returned within 30 days following the last date of the activities registered for herein and/or are damaged due to neglect. If Boys & Girls Club is required to seek collection and/or reimbursement of uniform and/or equipment by legal action, I further agree to pay all court costs and legal fees.

Signature of Parent or Legal Guardian _____ Date _____

OFFICE USE ONLY

Date: _____ Paid \$ _____ Cash ___ Check Receipt # _____ Membership # _____

Sport _____ Revised MARCH 2013

GREAT FUTURES START HERE.