

GREAT FUTURES START HERE.



BOYS & GIRLS CLUBS
OF MARTIN COUNTY

2019 Summer Program Registration



The Boys & Girls Clubs of Martin County's Summer Program will start on Monday, June 3, 2019 and end on Friday, August 2, 2019. Registration is based on a first-come-first-served basis. A parent or guardian must register each member and a parent or guardian must attend a mandatory orientation to complete the process.

___ Palm City ___ Hobe Sound ___ Indiantown ___ Port Salerno

Member #1		Last Name	First Name		Middle Name
Age	Will they turn 13 between now and 8/2/2019? ___ Yes ___ No	Eligible for ELC? ___ Yes ___ No	If Yes, List Redetermination Date _____	T-Shirt Size __ Child Small __ Adult Small __ Child Med __ Adult Med __ Child Large __ Adult Large __ Adult XLarge	
Member #2		Last Name	First Name		Middle Name
Age	Will they turn 13 between now and 8/2/2019? ___ Yes ___ No	Eligible for ELC? ___ Yes ___ No	If Yes, List Redetermination Date _____	T-Shirt Size __ Child Small __ Adult Small __ Child Med __ Adult Med __ Child Large __ Adult Large __ Adult XLarge	
Member #3		Last Name	First Name		Middle Name
Age	Will they turn 13 between now and 8/2/2019? ___ Yes ___ No	Eligible for ELC? ___ Yes ___ No	If Yes, List Redetermination Date _____	T-Shirt Size __ Child Small __ Adult Small __ Child Med __ Adult Med __ Child Large __ Adult Large __ Adult XLarge	
Member #4		Last Name	First Name		Middle Name
Age	Will they turn 13 between now and 8/2/2019? ___ Yes ___ No	Eligible for ELC? ___ Yes ___ No	If Yes, List Redetermination Date _____	T-Shirt Size __ Child Small __ Adult Small __ Child Med __ Adult Med __ Child Large __ Adult Large __ Adult XLarge	
Member #5		Last Name	First Name		Middle Name
Age	Will they turn 13 between now and 8/2/2019? ___ Yes ___ No	Eligible for ELC? ___ Yes ___ No	If Yes, List Redetermination Date _____	T-Shirt Size __ Child Small __ Adult Small __ Child Med __ Adult Med __ Child Large __ Adult Large __ Adult XLarge	

Parent/Guardian Summer Program Information

Primary Parent/Guardian Last Name	First Name		Middle Name
Home/Cell Phone	Work Phone		Relationship to Member
Street Address	City	Zip Code	Email Address
Secondary Parent/Guardian Last Name	First Name		Middle Name
Home/Cell Phone	Work Phone		Relationship to Member
Street Address	City	Zip Code	Email Address
Emergency Contact Last Name <small>(other than those already listed)</small>	First Name		Middle Name
Home/Cell Phone	Work Phone		Relationship to Member
Street Address	City	State	Zip Code

If you would like more information on low-cost/no-cost health insurance for your child(ren) please check here.

For Planning Purposes it Would be Helpful if You Could Mark the Weeks Your Child Plans to Attend:

- June 3-7, 2019
 June 10-14, 2019
 June 17-21, 2019
 June 24-28, 2019
 July 1-3, 2019
 July 8-12, 2019
 July 15-19, 2019
 July 22-26, 2019
 July 29-August 2, 2019
 ALL

By signing this registration, I certify that the information on this form is true and complete. I understand that filing a registration form containing any false, incomplete or misleading information may result in termination of my child(ren)'s membership.

Parent/Guardian Signature

Parent/Guardian Printed Name

Date

