



BOYS & GIRLS CLUBS
OF NORTHEAST FLORIDA

* is Required

2019 Summer Enrollment

Submission of this application does not guarantee that your child has been accepted in the Summer Camp Program.

APPLICATIONS MUST BE REVIEWED AND APPROVED BY THE CLUB'S UNIT DIRECTOR. Once the Unit Director has approved your application, you will be contacted via phone or email with additional instructions including Parent Orientation Dates and payment options.

Applications will be rejected for missing or incorrect Student ID Numbers and other mandatory information.

Student

(1) Member Information

* Last Name:

* First Name:

Middle Name:

Social Security
(last 4 digits):

Birthday:

*Gender:

*Race/Ethnicity:

* Club:

* School:

* Current Grade:

* Student ID:

* Income Level:

* Free/Reduced Lunch:

* Household Size:

* Living With:

* Is Parent Active Military: Yes No

Military Branch:

Status:

* Parent's Email:

* I agree to receive emails from BGCNE (Y/N):

(2) Member Address

* Address Attention:

* Address:

City: State: Zip:

Phone:

Cell:

(3) Contact Information

* Contact instructions:

* Emergency contacts:

(4) Medical Information

Interests activites:

* Language spoken at home:

* Doctor contact:

Last Visit:

Dentist contact:

* Allergies:

* Medical Warnings:

* Medications:

* Special needs:

Insurance:

Insurance company:

Insurance ID:

Parent 1

(5) Parent Information

* Last name:

* First name: _____

* Relationship:

* Email:

* Phone:

* Cell:

* Employer:

* Guardian: Yes No

* Authorized to pick up: Yes No

Same Address as Member: Yes No

Parent 2

(5) Parent Information

* Last name: _____

* First name: _____

* Relationship:

* Email:

* Phone:

* Cell:

* Employer:

* Guardian: Yes No

* Authorized to pick up: Yes No

Same Address as Member: Yes No