

| BGC STAFF USE ONLY | | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| Date Received/ Staff Initials | | | | | | | | |
| Payment Received ☐ Yes ☐ No | | | | | | | | |
| Scholarship: ☐ Military ☐ ELO PVSD ☐ ELO UPCS | | | | | | | | |
| Fee Charged | | | | | | | | |
| Membership # | | | | | | | | |

2025 - 2026 MEMBERSHIP APPLICATION

| MEMBER INFORMATION (REQUIRED) | | | | | | | | | |
|---|-----|------------------------------|-----------------------------------|---|----------|--|--|--|--|
| Last Name | | First Name | | ☐ Male ☐ Female ☐ Prefer not to say ☐ Other | | | | | |
| Date of Birth | Age | School Name | | Grade Teacher: | | | | | |
| Address | | City | | | Zip Code | | | | |
| Phone Number () | | Email Address | | | - | | | | |
| Guardian #1 Full Name | | Relation | | Phone Numbers (Home/Work/Cell) () | | | | | |
| Guardian #2 Full Name | | Relation | | Phone Numbers (Home/Work/Cell) | | | | | |
| Emergency Contact Full Name | | Relation | Authorized to Pick-Up Yes No No | Phone Numbers (Home/Work/Cell) () | | | | | |
| Emergency Contact Full Name | | Relation | Authorized to Pick-Up Yes □ No □ | Phone Numbers (Home/Work/Cell) () | | | | | |
| Emergency Contact Full Name | | Relation | Authorized to Pick-Up Yes No | Phone Numbers (Home/Work/Cell) () | | | | | |
| Emergency Contact Full Name | | Relation | Authorized to Pick-Up Yes No No | Phone Numbers (Home/Work/Cell) () | | | | | |
| Unauthorized Contact Full Name | | Notes: | | | | | | | |
| MEDICAL INFORMATION (REQUIRED) | | | | | | | | | |
| Name of Preferred Doctor | | Doctor's Phone Number () | | Insurance Policy Number | | | | | |
| Do you receive Medi-Cal? ☐ Yes ☐ No If Yes, Gold Coast Health Plan ☐ Yes ☐ No | | | | | | | | | |
| List any medical problems, allergies and/or current medications: | | | | | | | | | |
| EMPLOYER INFORMATION (REQUIRED) | | | | | | | | | |
| Parent/Guardian 1 Work-Company Name Parent/Guardian 2 Work-Company Name | | | | | | | | | |
| Do you think the company you work for would be interested in donating goods, services or dollars to help one of our programs? ☐ Yes ☐ No | | | | | | | | | |
| If yes, please provide the following information: | | | | | | | | | |
| Company Name | | Contact & Title at Company | | Phone Number | | | | | |

| Discounts Funding/Grant Products/Services Volunteer Days Other | My company will accont | request for (shock all that | annly) | | | | | |
|---|--|---|---|--|--|--|--|--|
| FOR THE PURPOSES OF GRANTS AND SURVEYS, PLEASE FILL IN THE FOLLOWING INFORMATION. THIS INFORMATION SCONEDENTIAL AND WILL NOT BE SHARED WITH ANY OTHER AGENCY. Bushold Size Subsidized Housing Resident? □ yes □ No Current Head of Household: □ Male □ Female □ Both Military Family? □ yes □ No Lives on Military Barse? □ yes □ No Military Family? □ yes □ No Lives on Military Barse? □ yes □ No Military Family? □ yes □ No Lives on Military Barse? □ yes □ No Military Family? □ yes □ No Military Family □ yes □ No Military Barsel □ No Military | | | | oor Days 🗖 Othor | | | | |
| Does the child qualify for Free or Reduced Lunch? Yes No | Discounts Drunding/ | grants in Products/Services | S 🗀 Volunte | eer Days 🗖 Other | | | | |
| Does the child qualify for Free or Reduced Lunch? Yes No | 501 | D THE PHIPPOSES OF COAN | TC AND CHE | OVEVS DIFACE FUL | IN THE FOLLOWING INFORM | MATION | | |
| Bose the child qualify for Free or Reduced Lunch? Yes No | | | | | | | | |
| Does the child qualify for Free or Reduced Lunch? Yes No Current Head of Household: Maile Female Both | | | | | | 52.1.011 | | |
| Single Parent? Yes No | | for Free or Reduced Lunch | | | | | | |
| Please Indicate member's race: White | | | | | I: ☐ Male ☐ Female ☐ Bo | oth | | |
| Please Indicate member's race: White | • | | Lives on | Military Base? Y | 'es 🗖 No Military Bran | nch: | | |
| Asian | · · · | | | • | , , , , , , , , , , , , , , , , , , , | | | |
| Asian | ☐ White | | | ☐ American In | dian/Alaskan Native | | | |
| Middle Eastern or North African | | | | | | | | |
| Black/African American | | | | | | | | |
| Please indicate your household size and annual income: Household Size 30% Median 50% Median 80% Me | | | | | aiian/Other Pacific Islander | | | |
| Please indicate your household size and annual income: | ☐ Black/African Amer | ican | | ☐ Other | | | | |
| Please indicate your household size and annual income: | | | 110110 | | VAE | | | |
| Household Size 30% Median 50% Median 80% Median >80% Median \$80 Me | | | | | VIE | | | |
| 1 \$0 - \$31,450 \$31,451 - \$52,400 \$52,401 - \$83,850 \$83,851 or more 2 \$0 - \$35,950 \$35,951 - \$59,900 \$59,901 - \$95,801 or more 3 \$0 - \$40,450 \$40,451 - \$67,400 \$67,401 - \$107,800 \$107,801 or more 4 \$0 - \$44,900 \$44,901 - \$74,850 \$74,851 - \$119,750 \$119,751 or more 5 \$0 - \$44,900 \$44,901 - \$74,850 \$74,851 - \$119,750 \$119,751 or more 6 \$0 - \$52,100 \$52,101 - \$86,850 \$80,851 - \$129,350 \$129,351 or more 7 \$0 - \$50 - \$55,700 \$55,701 - \$92,850 \$92,851 - \$148,500 \$148,501 or more 8 \$0 - \$55,5700 \$55,701 - \$92,850 \$93,851 - \$158,100 \$158,101 or more 7 \$0 - \$50 - \$59,300 \$559,301 - \$98,850 \$98,851 - \$158,100 \$158,101 or more 7 \$0 - \$50 - \$59,300 \$559,301 - \$98,850 \$98,851 - \$158,100 \$158,101 or more 8 \$0 - \$59,300 \$59,301 - \$98,850 \$98,851 - \$158,100 \$158,101 or more 8 \$0 - \$59,300 \$59,301 - \$98,850 \$98,851 - \$158,100 \$158,101 or more 9 \$0 - \$100,000 | • | | | | | | | |
| □ 2 □ \$0 - \$35,950 □ \$35,951 - \$59,900 □ \$59,801 or more □ 3 □ \$0 - \$40,450 □ \$40,450 □ \$40,451 - \$67,405 □ \$74,850 □ \$74,851 - \$119,750 □ \$119,751 or more □ 4 □ \$0 - \$44,900 □ \$44,901 - \$74,850 □ \$74,851 - \$119,750 □ \$119,751 or more □ 5 □ \$0 - \$48,500 □ \$48,501 - \$80,850 □ \$88,851 - \$129,350 □ \$129,351 or more □ 6 □ \$0 - \$52,100 □ \$52,101 - \$86,850 □ \$86,851 - \$138,950 □ \$138,951 or more □ 7 □ \$0 - \$555,700 □ \$55,701 - \$92,850 □ \$92,851 - \$148,500 □ \$148,501 or more □ 8 □ \$0 - \$555,700 □ \$55,701 - \$92,850 □ \$92,851 - \$148,500 □ \$148,501 or more □ 8 □ \$0 - \$555,700 □ \$59,300 □ \$59,301 - \$98,850 □ \$98,851 - \$158,100 □ \$158,101 or more □ 8 □ \$0 - \$559,300 □ \$59,301 - \$98,850 □ \$98,851 - \$158,100 □ \$158,101 or more □ 8 □ \$0 - \$559,300 □ \$59,301 - \$98,850 □ \$98,851 - \$158,100 □ \$158,101 or more □ 8 □ \$0 - \$559,300 □ \$59,301 - \$98,850 □ \$98,851 - \$158,100 □ \$158,101 or more □ 8 □ \$0 - \$559,300 □ \$59,301 - \$98,850 □ \$98,851 - \$158,100 □ \$158,101 or more □ 9 □ \$0 - \$559,300 □ \$59,301 - \$98,850 □ \$98,851 - \$158,100 □ \$158,101 or more □ 9 □ \$0 - \$559,300 □ \$59,301 - \$98,850 □ \$98,851 - \$158,100 □ \$158,101 or more □ 9 □ \$0 - \$559,300 □ \$59,301 - \$98,850 □ \$98,851 - \$158,100 □ \$158,101 or more □ 9 □ \$0 - \$518,101 or more □ 9 □ \$0 - \$559,300 □ \$59,301 - \$99,850 □ \$99,851 - \$158,100 □ \$158,101 or more □ 9 □ \$0 - \$518,101 or more □ 9 □ \$0 - \$518,101 or more □ 9 □ \$0 - \$158,101 or more □ 10 □ \$158,101 or more □ | | | | | | | | |
| 3 \$0-\$40,450 \$40,451-\$67,400 \$67,401-\$107,800 \$107,801 or more \$0-\$44,900 \$44,901-\$74,850 \$74,851-\$119,750 \$119,751 or more \$15 \$0-\$44,900 \$44,901-\$74,850 \$74,851-\$119,750 \$119,751 or more \$15 \$0-\$44,500 \$50-\$44,500 \$48,501-\$80,850 \$80,851-\$129,350 \$129,351 or more \$16 \$0-\$55,700 \$552,101-\$86,850 \$88,851-\$132,950 \$138,951 or more \$170,854,850,850 \$184,501 or more \$18 \$0-\$55,700 \$555,701-\$92,850 \$99,851-\$148,500 \$138,501 or more \$18 \$0-\$55,700 \$555,701-\$92,850 \$99,851-\$148,500 \$138,501 or more \$18 \$0-\$55,701-\$92,850 \$99,851-\$148,500 \$138,501 or more \$18 \$0-\$55,701-\$92,850 \$99,851-\$148,500 \$184,501 or more \$18 \$190,854,950 \$190,851-\$190,850 \$ | | | | | . , . , | | | |
| 4 | | · | | | | | | |
| \$0 - \$48,500 \$48,501 - \$80,850 \$80,851 - \$129,350 \$129,351 or more 6 | | · | | | | | | |
| 6 | | · | | | | | | |
| 7 | | · | | | | _ | | |
| ANNUAL MEMBERSHIP FEE The mission of the Boys & Girls Club of Camarillo is to enable all youth, especially those who need us most, to reach their full potential as productive, caring, and responsible citizens. Our fees are low so no family/child ever has to choose between Club membership or everyday essentials and no child is ever denied membership due to inability to pay. Community support keeps our fees low, would you be willing to sponsor another child's \$125 membership? PARENT/GUARDIAN ACKNOWLEDGMENT I am the parent / legal guardian of the child listed on this application for membership to the Boys & Girls Club of Camarillo. I understand that my child can enter and leave the Boys & Girls Clubs of Camarillo (referred to as the Club) AT WILL and that the Club is not a Licensed 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 rights and claims for damages which I may hereafter have against the Club and/or its assigns for any injuries or damages which may be sustained or suffered by said child in connection with or entry in an/or arising 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 permit a representative of the Boys & Girls Clubs of Camarillo to authorize the medical doctor or hospital to administer any medical treatment to my child. I hereby permit my child to be used in public relations materials if the opportunity arises. I understand that membership in the Club is a privilege and if my child is not able to abide by all safety rules, the membership can be suspension per | | · | | | | | | |
| ANNUAL MEMBERSHIP FEE The mission of the Boys & Girls Club of Camarillo is to enable all youth, especially those who need us most, to reach their full potential as productive, caring, and responsible citizens. Our fees are low so no family/child ever has to choose between Club membership or everyday essentials and no child is ever denied membership due to inability to pay. Community support keeps our fees low, would you be willing to sponsor another child's \$125 membership? Yes | _ | · | | | · | • | | |
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| 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 | The mission of the Boy productive, caring, and essentials and no child sponsor another child Tyes No \$125 PARENT/GUARDIAN ACK I am the parent / legal, can enter and leave the cannot give my child con in Club activities. The consideration of this professed for ever discharge any may be sustained or sustivity or event. In the to authorize the medic materials if the opport membership can be suverbally abusive towal enforcement may be consideration of the professed for every discharge any in the professed for every discharge and the professed for events. In the consideration of the professed for every discharge any in the professed for every discharge and the professed for every discharge for every discharge for events. In the consideration of the professed for every discharge | rs & Girls Club of Camarillo is to de responsible citizens. Our feet is ever denied membership de s's \$125 membership? The Other Amount: CNOWLEDGMENT Guardian of the child listed on the Boys & Girls Clubs of Camaronstant exclusion attention. If Club provides staff in all areast permission, I understand, here rights and claims for damages uffered by said child in connect event of an injury to my child call doctor or hospital to adminity arises. I understand that uspended for designated perior designated perior designated. All fees to the Club of IGNATURE | this applicating rillo (referred further under sof Club active by for and owhich I may be ection with or and I cannot mister any metal membership ods of time of er parents, owill be forfeit | on family/child ever help to pay. Community on for membership to dit to as the Club) AT vistand that it is my resivities. I hereby give rin behalf of said child hereafter have against entry in an/or arisivities to contacted, I hereby dical treatment to more in the Club is a priving revoked permaner or guests, while at the diduring the suspendance. DATE | o the Boys & Girls Club of Camar WILL and that the Club is not a sponsibility to give my child instruy permission for my child to pd., our heirs, executors, and admist the Club and/or its assigns for mg out of traveling to, participally permit a representative of the y child. I hereby permit my child ilege and if my child is not able to the club, my child may be removed ision period and/or at the moments. | mbership or everyday ould you be willing to a cucions to stay and participate articipate in Club Programs. In ministrators waive, release and any injuries or damages which ting in, or returning from said Boys & Girls Clubs of Camarillo do to be used in public relations to abide by all safety rules, the not / guardian am physically or red from the program and law ent of membership revocation. | | |
| | damage to the Club an | d the equipment, and most in | nportantly to | have fun. I also know | v if I am suspended from the Clu | | | |