BOYS & GIRLS CLUBS
OF HALL COUNTY

ATHLETIC REGISTRATION FORM

Fee: Members $40
Non-Members $65
Non-refundable
Payment is required at Registration

Program: (check one)

☐ Basketball

☐ Soccer

Shirt Size: (circle one)

Youth				*Adult*			
S	M	L	XL	S	M	L	XL

Shorts Size: (circle one)

Youth				*Adult*			
S	M	L	XL	S	M	L	XL

Child's Name_____ Age___ Grade_____ Date of Birth_____

Address_____City_____Zip_____

Home Phone _____Alternate Phone _____

Email Address_____ School_____

Parent/Guardian_____

List any medical conditions and/or medications used by participant_____

Emergency Contact_____Phone Number_____

For Boys & Girls Clubs of Hall County statistical and grant data. Please assist us with the following information.
Gender: Male____ Female____
Race/Ethnicity: African American____ Asian____ Hispanic____ Caucasian____ Other____

I have read and completed the entire application. In consideration of your accepting this entry, I hereby, for myself, my child, my heirs, executors and administrators, waiver and release any and all rights and claims for damages I or my child may have against the Boys & Girls Clubs of Hall County. I agree that the Boys & Girls Clubs of Hall County will not be responsible for any accident to the boy/girl while engaging in any activities on or away from the Boys & Girls Clubs of Hall County premises. I give my consent for photographs or videotapes, in which my son/daughter may appear, to be used in any way the Boys & Girls Clubs of Hall County may care to use them. If transportation is provided, I give permission for the above named child to be transported by bus, van, or car.

_____ _____

Parent/Guardian Signature Date