

**VARIETY
BOYS & GIRLS CLUB
OF QUEENS**

TEENS 13 TO 17

2011-2012 REGISTRATION FORM

Membership Period: Sept. 2011 to June 2012 Donation: \$25
Ages 13 to 17 Monday to Friday 2:30pm-7:00pm

Funded by NYC Dept Youth & Community Development
Contract Nos.:42377,840103

TEEN INFORMATION

CHILD NAME: _____ **DATE OF BIRTH:** _____
HOME ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP CODE:** _____
MEMBER ETHNICITY: African American ___ Asian ___ Hispanic/Latino ___ Caucasian ___ Native American ___ Other ___
SCHOOL: _____ **GRADE:** _____ **GENDER:** Male/Female **AGE:** _____

ARIS INFORMATION

Homework assistance: If you consent to VBGCQ following your child's progress in school please provide your child's (NYC Dept. of Ed Achievement Reporting & Innovation System) ARIS student id (username) and password .

EMERGENCY CONTACT:

NAME: _____ **RELATIONSHIP:** _____ **PHONE:** _____
Name of Company Employed by Mother/Guardian: _____
Name of Company Employed by Father/Guardian: _____

List any allergies or medical concerns (if more than one child, include that child's name)

Are there any behavioral issues related to your child(ren) that we should be aware of prior to membership? Does your child have difficulty at home, at school or in other programs? We pride ourselves in building relationships with all children, however it is important to know as much as we can prior to working with your child.

All information gathered for registration is strictly confidential. The data collected here helps us best describe our collective membership to our funders; individuals, government & foundations. The actual annual cost per membership is approximatley \$1500 per member. Outside funding and information is crucial to keep our fees low and affordable to all. If you wish to skip this section and pay the actual cost of membership you may do so. Please contact us if you have any questions.

HOUSEHOLD INFORMATION

DOES CHILD LIVE WITH BOTH PARENTS? Y/N _____ **NUMBER OF ADULTS LIVING WITH CHILD:** _____
NUMBER OF CHILDREN LIVING IN THE HOME: _____ **TOTAL HOUSEHOLD INCOME:** _____

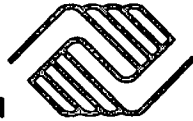
PARENT / GUARDIAN INFORMATION

| | |
|---|---|
| Mother: | Father: |
| ADDRESS: _____ | SECONDARY NAME, ADDRESS, CONTACT PHONE (if child custody is shared): |
| CITY & ZIP: _____ | |
| HOME PHONE: | HOME PHONE: |
| CELL PHONE: | CELL PHONE: |
| ALTERNATE PHONE: | ALTERNATE PHONE: |
| PARENT / GUARDIAN EMAIL ADDRESS: | SECONDARY EMAIL ADDRESS: |

By signing below, I declare that all information in this application is true and correct to the best of my knowledge.

Parent/Guardian Signature: _____ Date: _____

Salah M. Hassanein Variety Boys & Girls Club of Queens
21-12 30 Road, Long Island City, NY 11102
TEL: (718) 728-0946 FAX: (718) 728-4001 www.vbgcq.org



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FOR AGES 13 AND UP

PLEASE READ CAREFULLY. By signing this legal document you are giving up any rights you may have to sue Variety Boys & Girls Club for any money damages.

RELEASE AND WAIVER

I desire to participate in or attend one or more activities or events either partially or wholly sponsored, produced, directed, organized, conducted, coached or paid for by Variety Boys & Girls Club of Queens, Inc.

1. ASSUMPTION OF RISK. Before participating or attending the event I will inspect the facilities and equipment to be used for the event, if I believe anything is unsafe I will immediately advise the official of the event of the conditions and refuse to participate or attend until the conditions are corrected to my satisfaction. Variety Boys & Girls Club has made no representation to me as to the suitability, condition, or safety of the facilities, equipment, or vehicles involved in the event. I understand that participation in or attendance at the event involves adherent risks and dangers of accidents, property loss, or damage, serious personal and bodily injury, death, and severe social or economic losses. These may result not only from my own actions, inactions, or negligence, but the actions, inactions, or negligence of others. I understand and I have considered and evaluated the nature, scope, and extent of the risks involved and I voluntarily and freely choose to assume these risks.

2. RELEASE OF LIABILITY. I fully and forever release, and discharge Variety Boys & Girls Club, their subsidiaries, directors, officers, employees, agents, insurers, sponsors, advertisers, owners, or operators of the event, facilities, equipment, and vehicles, and all others involved in the event, losses, damages, claims (including negligence claims), demands, lawsuits, expenses, and any other liability of any kind to me, my property, or any other person directly or indirectly arising out of or in conjunction with my participation in or attendance at the event, including transportation related to the event even if it is due to the negligence or other fault of the released parties.

3. COVENANT NOT TO SUE. I will not initiate any lawsuit, court action, or other legal proceedings against the released parties, nor join or assist in the prosecution of any claim for money damages which anyone may have on account of injuries (including death), losses, or damages sustained by me or others in connection with my participation in or attendance at the event, and I waive any right I may have to do so. This means that I cannot sue to hold the released parties responsible for any injuries, losses, damages that I may experience related to the event even if it is due to the negligence or other fault of the released parties. I waive my insurer's right to make a claim against the released parties based on payments by insurers to me or on my behalf for any reason. This means my insurers have no right of subrogation.

4. NO INSURANCE, MEDICAL EXPENSES. I understand that Variety Boys & Girls Club and others involved in this event do not provide me with any insurance, either life, medical, or liability, for any illness, accident, injury, loss, or damage that may arise in connection with my participation in or attendance at the event. If I want insurance of any kind I must obtain my own. I will pay my own medical emergency expenses and all subsequent medical expenses in the event of any illness, accident, or injury in connection with the event.

5. VALIDITY. If any portion of this release and waiver is held to be invalid or unenforceable, all other provisions shall nevertheless continue to be valid and enforceable. This Release and Waiver supersedes any oral or written statements made by me in connection with the event. I understand that I cannot terminate, cancel, or revoke this Release and Waiver for any reason.

I HAVE READ THIS RELEASE AND WAIVER CAREFULLY, I FULLY UNDERSTAND ITS CONTENT AND VOLUNTARILY AGREE TO ITS TERMS.

Participant's Printed Name _____ Date: _____

Participant's Signature _____

Parent's Printed Name _____

Parent's Signature _____