



Boys & Girls Club
of Pembroke

1144 Lea Street
P.O Box 1354
Pembroke, ON K8A 6Y6
613-735-1933

www.boysandgirlsclubofpembroke.com

Email: bonnie.s@boysandgirlsclubofpembroke.com

APPLICATION FOR MEMBERSHIP

2011 - 2012 CLUB YEAR		NEW MEMBER: YES / NO	
Member's Name (Last) _____		(First) _____	(Name Used)
BIRTH DATE (da-MON-yy) _____		Gender <input type="checkbox"/> Female <input type="checkbox"/> Male	Kinder (ages 4-5) <input type="checkbox"/> Child (ages 6-9) <input type="checkbox"/> Youth (ages 10-12) <input type="checkbox"/> Teen (ages 13 +) <input type="checkbox"/>
School Name _____	Grade _____	Age _____	

LIVING WITH: Mother / Father / Both / Shared / Guardian			Town/Township _____		
Name (last, first) _____			Name (last, first) _____		
Street Address (apt, unit) _____			Street Address (apt, unit) _____		
City _____	Postal Code _____	Township _____	City _____	Postal Code _____	Township _____
Home Phone _____	Cell Phone _____	Home Phone _____	Cell Phone _____		
Home Email Address _____			Home Email Address _____		
Employer _____	Work Phone _____	Employer _____	Work Phone _____		

TWO PERSONS AUTHORIZED TO PICK UP MEMBER			
Name (last, first) _____		Name (last, first) _____	
Home Phone _____	Work Phone _____	Home Phone _____	Work Phone _____

EMERGENCY CONTACTS			
Name (last, first) _____		Name (last, first) _____	
Home Phone _____	Work Phone _____	Home Phone _____	Work Phone _____

