

# Berwyn Heights Boys & Girls Club

# 2004 Family Registration

Valid Calendar Year 2004 for Children Ages 4 through 18

Mother's Name		Home Phone	Work Phone
Father's Name		Home Phone	Work Phone
Address	Town or City	Zip Code	
Emergency Contact Person	Relationship to Child	Emergency Phone	

**ANNUAL FEES EXPLANATION:**  
Prince George's County Boys and Girls Club Fee  
 \$10.00 for first child (\$20 after April 1)  
 \$10.00 for second child (\$20 after April 1)  
 \$7.00 for each additional child (\$17 after April 1)  
 (Families outside of the BHBGC's borders must pay these fees to their local Club only)

**NEW MEMBER REQUIREMENTS**  
 New members must provide BHBGC with:  
 - A copy of child's birth certificate  
 - A small recent photo of the child  
 - A completed Yellow County ID Card (obtained at registration)  
 - A completed White County Registration Form (obtained at registration)  
 - A completed Family Registration Form (this form)

Berwyn Heights Boys & Girls Club Fees  
 Fees consist of a \$25 Sports Fee per child per sport.  
 Maximum fees to BHBGC per family per year is \$100.

Spring Soccer	Spring Baseball	Spring Softball	Spring T-Ball	Fall Soccer	Cheerleading	Winter Basketball	Sports Fees Sub-Total	PGCBGC (County) Fee
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Child's Last Name (Please print)	Child's First Name (Please print)	Birth Date Mo/Day/Yr	SPORTS FEE: Insert \$25 Fee below Check all sports interested in but not paid for at this time.							Sports Fees Sub-Total	PGCBGC (County) Fee
1.			\$	\$	\$	\$	\$	\$	\$		\$10
2.			\$	\$	\$	\$	\$	\$	\$		\$10
3.			\$	\$	\$	\$	\$	\$	\$		\$7
4.			\$	\$	\$	\$	\$	\$	\$		\$7

**SIGNATURE REQUIRED FOR MEMBERSHIP**

*I understand and agree with my signature to the following:*

- that in order for my children to be eligible for sports participation for the calendar year 2004, I must register my family via this form and pay any applicable fees.
- that my children listed above have my consent to join the Berwyn Height Boys and Girls Club.
- that the BHBGC does not assume any responsibility for any accidents, or any medical, dental, hospital or other expense incurred while traveling to or from, or participating in, club activities.
- that I waive any claims against the BHBGC or any of its agents in the event of an accident to any of my children listed above.
- that I am responsible for any uniform my child receives, and if I fail to return the uniform within 2 weeks of the completion of that sport season, I will be expected to pay \$20 toward the replacement of the uniform.
- that games involving Berwyn Heights teams may be videotaped and shown on the Berwyn Heights cable TV channel

Subtotal	\$	\$
TOTAL BHBGC FEES	\$	Maximum \$100
<b>TOTAL FEES DUE: \$ _____</b>		
<input type="checkbox"/> Cash <input type="checkbox"/> Check # _____		

Parent Signature	Date	Received by	Date
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