

# Downloadable PDF - Family Information Form

Today's Date \_\_\_\_/\_\_\_\_/\_\_\_\_

- New Member** Must complete this form
- Current Member** Only need to complete Activity Registration
- Current Member; New Info** List new info on this page and complete Activity Registration
- Participating as a Non-Member** Must complete this form and Activity Registration

1st Child's Name \_\_\_\_\_  Female  Male

School \_\_\_\_\_  Grade

Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_

2nd Child's Name \_\_\_\_\_  Female  Male

School \_\_\_\_\_  Grade

Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_

3rd Child's Name \_\_\_\_\_  Female  Male

School \_\_\_\_\_  Grade

Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_

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**Child Lives With:**

Both parents  Parent #1  Parent #2  Other (please specify):

Parent #1 Full Name \_\_\_\_\_

Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_

Employer \_\_\_\_\_

Occupation \_\_\_\_\_

Title \_\_\_\_\_ Work Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Parent #2 Full Name \_\_\_\_\_

Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Email \_\_\_\_\_

Employer \_\_\_\_\_

Occupation \_\_\_\_\_

Title \_\_\_\_\_ Work Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

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Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Primary Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_ Secondary phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Physician's Name \_\_\_\_\_

Physician's Phone ( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Specific Health Problems \_\_\_\_\_

The undersigned parent or legal guardian of the children (child) listed above acknowledges that many of the activities conducted by The Menomonee Club for Boys and Girls, including all of the athletic activities, are inherently dangerous and releases the Club and its agents, to the extent to which the Club does not have insurance coverage, from all claims which the undersigned and/or the children (child) may have, except as a result of willful misconduct, arising from the children's (child's) participation in the Club's activities, and agrees to indemnify the Club and such persons to the extent any claim is made by such children (child). In case of emergency, and if parent or designated emergency contact is unavailable, children will be treated at Children's Memorial Hospital.

Signature \_\_\_\_\_

Date \_\_\_\_/\_\_\_\_/\_\_\_\_