



## Picuris Pueblo

### Application for Membership 2021

Youth First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender- Male: \_\_\_\_\_ Female: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Race: Check all that apply American Indian \_\_\_\_\_ White \_\_\_\_\_ Hispanic \_\_\_\_\_ Other \_\_\_\_\_

Is your child an enrolled member of Picuris Pueblo? Yes: \_\_\_\_\_ No: \_\_\_\_\_ Enrollment # (CIB) \_\_\_\_\_

If your child an enrolled member in another tribe, include the name of the tribe and enrollment number below.

Name of Tribe: \_\_\_\_\_ Enrollment # (CIB) \_\_\_\_\_

#### Important Health Information:

Does your child have any health problems, allergies or handicaps? Yes \_\_\_\_\_ No \_\_\_\_\_

Please Explain: \_\_\_\_\_

Does your child have any medical, physical or mental disorders? Yes \_\_\_\_\_ No \_\_\_\_\_

Please Identify: \_\_\_\_\_

Please list any medication your child is currently taking: \_\_\_\_\_

Does a hospital or doctor have permission to treat your child in the case of emergency? Yes \_\_\_\_\_ No \_\_\_\_\_

#### Transportation:

Will your child walk or ride from the club? \_\_\_\_\_ Please note, all riders must have a pick-up release form completed and only those individuals will be allowed to pick up your child/member.

#### Additional Emergency Contact Other Than Parent/Guardians

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone # ( ) \_\_\_\_\_ - \_\_\_\_\_

Parent/Guardian's Signature

Club Member's Signature

Date



## Picuris Pueblo

### Pick-Up/Release Form

The following people have authorization to pick my child up from the  
Boys & Girls Club of Picuris Pueblo

Name	Relationship	Contact #
1. _____	_____	(    ) _____ - _____
2. _____	_____	(    ) _____ - _____
3. _____	_____	(    ) _____ - _____

### Waiver and Release of Liability

This is to certify that I, \_\_\_\_\_ as **parent/guardian** with legal responsibility for my minor child acknowledge that she/he will be engaged in activities that may involve risk of injury at the Boys and Girls Club of Picuris Pueblo in New Mexico. I do recognize and assume that risk, whether foreseeable or not reasonable foreseeable, on behalf of my child in connection with participation in activities of recreation and instruction at the Boys & Girls Club of Picuris Pueblo.

On behalf of my minor and her/his legal representatives, I hereby release and agree to indemnify the Boys & Girls Club of the Picuris Pueblo of New Mexico and their affiliates, administrators, directors, board members, managers, agents, coaches, their employees, other participants, and sponsor agencies from any and a claims and damages instituting or arising out of my minor child's involvement or participation in the programs at the Boys & Girls Club of Picuris Pueblo in New Mexico.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Club Member's Signature

\_\_\_\_\_  
Date



## Picuris Pueblo

### Parental Release Form

I, \_\_\_\_\_ the parent/guardian of the minor child listed on this application, for ourselves, our heirs, executors and administrators, hereby release, waive, acquit and forever discharge the Boys & Girls Club of Picuris Pueblo of New Mexico, and the Boys & Girls Club of America, their representatives, successors, insurers, assigns or any other person or entity associated with any of the above organizations such as staff, directors or volunteers from all liability, claims, demands or cause of action for any and all loss, damage, injury or death and any claim of damages resulting from use of facilities owned or controlled by the above organizations, or participation in activities of said organizations either at or away from the Club.

#### Medical Treatment

\_\_\_\_\_ I give permission to the Boys & Girls Club of Picuris Pueblo of New Mexico to seek emergency medical treatment for my minor child if I cannot be reached. I will be responsible for all costs of medical attention and treatment.

#### Surveys and Questionnaires

\_\_\_\_\_ I the parent/guardian of the minor child listed on this application, give permission for Boys & Girls Club of Picuris Pueblo to survey my child about his or her Club experience and behaviors, skills and attitudes using Boys & Girls Clubs of America's Youth Development Outcome Measurement Tool Kit surveys or other survey instruments.

#### School Information

\_\_\_\_\_ I give my permission to the Boys & Girls Club of Picuris Pueblo and the Peñasco Independent Schools to exchange information regarding the child listed in this application. This includes progress and report cards, disciplinary referrals and attendance reports. The purpose of the exchange is to help both organizations communicate in helping the student be successful in school, in the Boys & Girls Club and in life. These release is valid for one year and may be revoked at any time by contacting the Boys & Girls Club in writing. I also give permission for the staff at the Boys & Girls Club of Picuris to make a copy of my child's progress reports and report cards, so that staff can track his/her progress.

#### Technology

\_\_\_\_\_ As a member of the Boys & Girls Club, your child will have access to the Internet. While precautions are being taken, it is possible that she/he may access inappropriate sites. Boys & Girls Club of Picuris Pueblo will have rules and consequences at the Club for such behavior; however, we will not be responsible for the consequences of such access.

#### Miscellaneous

\_\_\_\_\_ I understand that the Boys & Girls Club of Picuris Pueblo is not responsible for lost or stolen items. Parents and Club members are responsible for their own transportation to and from the Club (Picuris Gym).

\_\_\_\_\_ I give permission for my child's picture, video, or educational publication to be used by the Boys & Girls Club of Picuris and its activities.

I have read the application, Parent/Youth Handbook, and this form, understanding the rules of the Boys & Girls Club and request that my child be admitted into the membership.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Club Member's Signature

\_\_\_\_\_  
Date



## Picuris Pueblo

### Health Form

Name \_\_\_\_\_ Gender \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_  
Last First MI

Parent/Guardian \_\_\_\_\_ Phone \_\_\_\_\_  
Last First MI Day Evening

Home Address \_\_\_\_\_ Mailing Address \_\_\_\_\_  
Number and Street

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

Emergency Contact Other than Parent/Guardian \_\_\_\_\_ (Must be 18 or older)

Relationship to child \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell/Work Phone \_\_\_\_\_

In case of emergency please take my child to \_\_\_\_\_ hospital for medical treatment.

### Medical Insurance

Policy Holder's Name	Name of Insurance Carrier
Policy/Group Number	Address of Insurance Carrier

**Required Signatures:** This form is correct to the best of my knowledge and the member listed above has permission to participate in club activities unless noted above.

**Authorization for treatment:** I hereby give permission to the medical personnel listed above to secure and administer treatment, including hospitalization and necessary transportation for my child listed above. Further, I agree to be responsible for all medical expenses acquired.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Club Member's Signature

\_\_\_\_\_  
Date



## Picuris Pueblo



### Permission Form

My child \_\_\_\_\_ has my permission to travel as needed with the Boys & Girls Club of Picuris Pueblo on tribal vehicles as events are sponsored at various sites.

My child has my permission to participate in club sponsored/tribal sponsored activities at the Picuris Pueblo Gym and Museum. These activities include but are not limited to swimming, indoor and outdoor activities, hiking, movies, bowling, gardening, and other cultural activities.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Club Member's Signature

\_\_\_\_\_  
Date



## Picuris Pueblo



### Parent Income Information Form

The following information is necessary for our records and the funding our organization receives. The answers you give will not affect your child joining the Boys & Girls Club of Picuris Pueblo. The answers you provide will be kept confidential. Thank you for your cooperation.

Who does the child live with? \_\_\_\_\_ Head of household \_\_\_\_ Male \_\_\_\_ Female

Single Parent Home \_\_\_\_ Yes \_\_\_\_ No Total # living in the home \_\_\_\_ Total # of children under age 18 \_\_\_\_

#### Annual Family Income level (please check one)

_____ \$0-\$4,999	_____ \$5,000-\$9,999	_____ \$10,000-\$14,999
_____ \$15,000-\$19,999	_____ \$20,000-\$24,999	_____ \$25,000-\$29,999
_____ \$30,000-\$34,999	_____ \$35,000-\$39,999	_____ \$40,000 and above

#### Please check all that apply for the household:

☐ SSDI (Disability) ☐ Day Care Voucher ☐ Food Stamps ☐ General Assistance ☐ Public Housing  
☐ Section 8 ☐ Free Lunch ☐ Reduced Lunch ☐ Veterans Compensation

Legal Guardian 1 \_\_\_\_\_  
Relationship to child \_\_\_\_\_  
Employer's Name \_\_\_\_\_  
Job Title \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Work Hours Per Week \_\_\_\_\_  
Email \_\_\_\_\_

Legal Guardian 2 \_\_\_\_\_  
Relationship to child \_\_\_\_\_  
Employer's Name \_\_\_\_\_  
Job Title \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Work Hours Per Week \_\_\_\_\_  
Email \_\_\_\_\_

I have explained the rules to my child and understand that the club or Picuris Pueblo will not be responsible for any accident to my child on the premises or while engaged in any of its activities away from the Club. I understand the Club or Picuris Pueblo is not responsible for any lost, stolen or damaged items in the Club. I hereby consent to the reproduction, publication and use of photographs/video footage taken of my child for educational use only and to promote the Boys & Girls Club of Picuris in fundraising events, newsletters and special event activities. I understand the importance of having Identification cards for my child/children safety. Identification cards are required for all members to take with them on all field trips and must include an emergency phone number on the ID card. I further understand that it is my responsibility to pick up my child right before closing time or to make other arrangements with other family members on this application when needed. I fully understand and agree to all the conditions stated on this form and have counseled my child to conform to the rules of the Boys & Girls Club of Picuris Pueblo and the authority of the employees of the Boys & Girls Club. **Please read the above information carefully before signing.**

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Club Member's Signature

\_\_\_\_\_  
Date