



“Hop on the Bus”

Thanks to a partnership between the MISD and the Boys & Girls Clubs of the Big Pines, kids from **SHMS**, **PTY**, or **MJHS** can take a bus from school to Marshall High School, where they will be escorted by BGC staff into *The Club*. *The Club*

routes begin Tuesday September 8th, 2009. Space is limited, so it is first come, first served.

The Details...

1. All children need to have a school-provided bus/transportation permission slip to come to *The Club* on an MISD bus.
2. All children must be a member in good standing of *The Club*.
3. It is the responsibility of your child to get on *The Club* bus. Not the school's. Not *The Club's*.
4. The child will be dropped off at Marshall High School where they will be escorted to *The Club* by BGC personnel.
5. Parents pick up their kids at *The Club*. There will not be bus service home from *The Club*.
6. Each child will get their own Boys & Girls Club card. The children **MUST** have their BGC card in advance to get on the bus. This means that a child may *not* hop on a bus without their BGC card. A replacement card can be purchased from *The Club* for \$3 prior to riding *The Club* bus.

For convenience, both forms need to be delivered to the Boys & Girls Clubs of the Big Pines prior to riding the bus going to *The Club*.

The Boys & Girls Club is open from 3 – 7 pm, Monday – Friday.



(903) 935-2030



The Boys & Girls Clubs of the Big Pines is a proud United Way Agency.

TRANSPORTATION INFORMATION

FOR BOYS & GIRLS CLUB

STUDENT NAME: _____

PHONE NUMBER _____

ADDRESS: _____

SCHOOL _____ GRADE _____

PARENT/GUARDIAN NAME: _____

MY CHILD HAS PERMISSION TO RIDE AN MISD BUS TO MARSHALL HIGH SCHOOL TO MEET A BOYS & GIRLS CLUB STAFF MEMBER. THE BOYS & GIRLS CLUB STAFF MEMBER WILL THEN WALK MY CHILD TO THE CLUB.

PARENTS/GUARDIAN SIGNATURE

DATE

A PERMISSION FORM MUST BE COMPLETED FOR EACH STUDENT. THANK YOU.



Membership Registration Form for: _____ Today's Date

Program	
<input type="checkbox"/>	Club Membership _____
<input type="checkbox"/>	Sports _____
<input type="checkbox"/>	Summer _____
<input type="checkbox"/>	Extension _____

Last Name _____

BOYS & GIRLS CLUBS
OF THE BIG PINES

Calendar Year Membership Fee: \$12.00 Good through Dec. 31st.

Please **complete** the form and **print clearly**. This information is confidential and the required data is for self-certification and contact purposes.

Youth Member Information: Renewal? No Yes

Last Name: _____ First Name: _____ Birth Date: ____/____/____

Address: _____ City: _____

Zip Code: _____ Home Telephone: (____) _____ Gender: Male Female

Pre-existing medical conditions (i.e. allergies, seizures, etc.)? If yes, please comment: _____

Grade Level You Are Currently Completing (if summertime-which you are entering): _____

Parent/Guardian Information:

Mother/Guardian's name: _____ Father/Guardian's name: _____

Parent E-mail Address (to send club & event info): _____

Mother's employer's name and phone #: _____

Father's employer's name and phone #: _____

Contact: _____ Phone: (____) _____ Relationship _____ Emergency Pick Up

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Ethnicity/Race

This information is only used for government reporting purposes to monitor compliance with equal opportunity laws. Please note that self-identification of race/ethnicity is voluntary.

- | | | |
|--|---|--|
| <input type="checkbox"/> White | <input type="checkbox"/> American Indian or Alaska Native AND White | <input type="checkbox"/> Hispanic/Latino |
| <input type="checkbox"/> Black/African American | <input type="checkbox"/> Asian AND White | <input type="checkbox"/> Cuban |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Black/African American AND White | <input type="checkbox"/> Puerto Rican |
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> American Indian/Alaska Native AND Black/African American | <input type="checkbox"/> Other Hispanic/Latino |
| <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> Other: _____ | |

Family Income Level (Check only ONE):

- \$0.00 - \$9,999.99
- \$10,000.00 - \$19,999.99
- \$20,000.00 - \$29,999.99
- \$30,000.00 - \$39,999.99
- \$40,000.00 - \$49,999.99
- More than \$50,000.00
- Other

Member lives with (Check all that apply):

- | | | |
|---|-------------------------------------|---|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Stepmother | <input type="checkbox"/> Grandparent(s) |
| <input type="checkbox"/> Father | <input type="checkbox"/> Stepfather | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Both Mother & Father | | |

Is it a Single Parent Household? Yes _____ No _____

Number Of People in your Household: _____
Number of Brothers _____ Number of Sisters _____ Other _____

Specific School Attending: _____



