

Membership Application 2023-24


BGC Dovercourt Clubhouse & Junction Triangle Clubhouse

All personal information provided is subject to the Club's Privacy Policy, which can be accessed at

www.bgcdovercourt.com

Membership annual fee: \$40.00

CHILD MEMBER INFORMATION		
Last Name: Thornton	First Name: Colby	Gender: female
Current Address: Similique eum numqua	City: Sint tempora eveniet	Postal Code: Nihil rem aperiam no
School: St. Sebastian		
Date of Birth (DD-MM-YYYY): 04-12-2001	Grade: SK	Language Spoken at home: Qui eiusmod atque vo
Health Card Number: 494	Family Doctor's Name: Bryar Sawyer	Family Doctor's Phone:
Does your child have any allergies? If so, please list allergies : yes, Deserunt consectetur		
Does your child take any medications? If so, please list all medications : yes, Mollit eiusmod recus		
Does your child have any medical or behavioural conditions that we should be aware of? : yes, Aut veniam dolores		
Does your child have any dietary needs or restrictions? If so, please list them: no,		

Does your child need any adaptable programming accommodations?: no		
CUSTODIAL PARENT / LEGAL GUARDIAN INFORMATION		
Last Name: Talley	First Name: Guy	Gender: female
Current Address: Dolores quaerat dolo	City: Obcaecati aut atque	Postal Code: Enim perferendis atq
Phone: +1 (224) 489-4978	Relationship to Child Member: Facilis eos ea non	Email: wegize@mailinator.com
CUSTODIAL PARENT / LEGAL GUARDIAN INFORMATION (Additional)		
Last Name: Pace	First Name: Tana	Gender: female
Current Address: Voluptate voluptate	City: A fuga Minus impedi	Postal Code: Perferendis ut aperi
Phone: +1 (203) 951-9571	Relationship to Child Member: Asperiores magnam nu	Email : bimyzaz@mailinator.com
Does your child have your permission to be released on their own at the end of the day?: yes	Signature: 	Date : 28-11-2005
<p align="center">EMERGENCY CONTACT APPROVED BY CUSTODIAL PARENT / LEGAL GUARDIAN</p> <p>This is a person who is authorized by the custodial parent / legal guardian to pick up your child and can be contacted by Dovercourt Staff when the custodial parent / legal guardian cannot be reached.</p>		
Last Name: Bauer	First Name: Whilemina	Gender: male
Home Phone : +1 (651) 185-7913	Work Phone : +1 (358) 129-6411	
Cell Phone : +1 (955) 244-1855	Relationship to the Child : Pariatur Porro volu	

I acknowledge and agree that I am the custodial parent or legal guardian of the minor child listed above (the "Child Member"). As a custodial parent and/or legal guardian of the Child Member, I hereby consent to the Club contacting the above Emergency Contact in the event that I cannot be reached.



Signature :

Date : 28-11-2005

MEDIA CONSENT

I acknowledge and agree that I am the custodial parent or legal guardian of the minor child listed above (the "Child Member"). I, on my own behalf, and on behalf of the Child Member, hereby give Boys and Girls Clubs of Canada our consent to use and reproduce the Child Member's first name/image for promotion purposes related to Boys and Girls Clubs of Canada, its member Boys and Girls Clubs and/or external partners. I, on my own behalf, and on behalf of the Child Member, agree and understand that the Child Member's first name (unless otherwise authorized)/image may be published or used in newspapers, promotional videos, television commercials, program brochures, posters, on World Wide Web or otherwise displayed to the public or used for other educational/fundraising purposes, either in whole or in part by Boys and Girls Clubs of Canada, its member Clubs, and/or external partners. I, on my own behalf, and on behalf of the Child Member, hereby release Boys and Girls Clubs of Canada and its agents from any and all claims, of any nature, based on any uses of the above.

accept

CODE OF CONDUCT

I acknowledge and agree that I am the custodial parent or legal guardian of the minor child listed above (the "Child Member"). I, on my own behalf, and on behalf of the Child Member, acknowledge and agree that the safety of each individual in the program is the utmost importance to the BGC Dovercourt Club (the "Club"). I, on my own behalf, and on behalf of the Child Member, agree that the Child Member and me will use the Junction Triangle Clubhouse (BGC Dovercourt Clubhouse & Junction Triangle Clubhouse) (the "Club Facilities") for their intended purposes only. I, on my own behalf, and on behalf of the Child Member, agree that performing high-risk activities in the Club Facilities is prohibited, including but not limited to, cartwheels, summersaults, gymnastics, karate, skateboarding, etc. (the "High-Risk Activities"). I agree to instruct the Child Member not to engage in such High-Risk Activities when attending Club activities or while using Club Facilities. I hereby agree and understand that any behavior by the Child Member that places the Child Member or others at risk, including but not limited to performing High-Risk Activities, may result in the Child Member's immediate dismissal from the Club's membership and/or removal from Club Facilities. Further, if the Child Member is dismissed from the program and/or removed from the Club Facilities, I agree to cover any expense(s) arising from such dismissal or removal. I hereby acknowledge and agree that no refund will be granted for dismissal or removal of the Child Member at my or the Child Member's request before the end of a program session. In order to ensure the safety and well-being of all individuals participating in Club programs, I understand and agree that the Club reserves the right to alter the programs at any time without notice or compensation.

I have read, understand and agree to comply with the Code of Conduct.

Signature :



Date : 07-08-2019

Assumption of Risk, Release and Indemnity

By accepting this liability waiver, I acknowledge and agree that I am the custodial parent or legal guardian of the minor child listed below (the "Child Member"). In consideration for being granted the right to access the Club, participate in Club programs, and use the Club Facilities, I, on my own behalf, and on behalf of the Child Member, acknowledge and agree (together, the "Releasors", "We" or "Our") as follows:

1. We understand and agree that access to the Club, participation in Club programs, and use of the Club Facilities is entirely voluntary and at Our own risk.
2. We acknowledge and agree that participation in Club programs and use of Club Facilities, and related activities and excursions, may expose the Releasors to potentially hazardous situations and the potential risk of harm or injury, and that some of these risks cannot be eliminated regardless of the care taken to avoid injuries. We also acknowledge that the specific risks vary from one activity to another, but range from (a) minor injuries such as scratches, bruises, and sprains, to (b) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks or concussions, and (c) catastrophic injuries including paralysis and death. We acknowledge and agree that such participation and use of the Club Facilities is undertaken at Our risk.
3. We acknowledge and agree that We are totally and solely responsible for Our safety while accessing the Club and using the Club Facilities and We fully accept and assume all risks (known and unknown) associated with accessing the Club and using the Club Facilities. We agree to observe and obey all rules and warnings, including any written and oral instructions given by the Club, its employees, or volunteers, with regard to accessing the Club and using the Club Facilities.
4. We hereby agree to assume full responsibility for any and all injuries or damage which are sustained, aggravated or caused by the Releasors or anyone else in relation to the Club or Club Facilities, as well as damages caused to the Club Facilities themselves.

5. THE RELEASORS AGREE TO RELEASE, REMISE, AND FOREVER DISCHARGE AND AGREE TO PERSONALLY INDEMNIFY AND SAVE AND HOLD HARMLESS THE CLUB, THE CORPORATION OF THE CITY OF TORONTO, AND EACH OF THEIR DIRECT AND INDIRECT PARENT, SUBSIDIARIES, AFFILIATES, AND EACH OF THEIR RESPECTIVE OFFICERS, DIRECTORS, MEMBERS, EMPLOYEES, VOLUNTEERS, REPRESENTATIVES, AND AGENTS, AND EACH OF THEIR RESPECTIVE SUCCESSORS AND ASSIGNS (COLLECTIVELY, THE "RELEASED PARTIES") FROM ANY AND ALL RESPONSIBILITY, DEMANDS, CLAIMS, ACTIONS, SUITS, PROCEDURES, COSTS, EXPENSES, DAMAGES, INJURIES, DEATH, LOSS, AND LIABILITIES (INCLUDING WITHOUT LIMITATION MEDICAL BILLS, ATTORNEY FEES AND OTHER LITIGATION COSTS, AND PROPERTY LOSS) (COLLECTIVELY, THE "CLAIM'S") TO THE FULLEST EXTENT ALLOWED BY LAW ARISING OUT OF OR IN ANY WAY RELATED TO THE RELEASOR'S ACCESS TO THE CLUB, PARTICIPATION IN CLUB PROGRAMS, OR USE OF THE CLUB FACILITIES AND/OR OUR GUESTS' ACCESS TO THE CLUB OR USE OF THE CLUB FACILITIES HOWSOEVER ARISING, INCLUDING NEGLIGENCE, BREACH OF CONTRACT, BREACH OF ANY STATUTORY OR OTHER DUTY OF CARE, ON THE PART OF ONE OR MORE OF THE RELEASED PARTIES, AND FURTHER INCLUDING THE FAILURE BY ONE OR MORE OF THE RELEASED PARTIES TO SAFEGUARD OR PROTECT THE RELEASORS FROM THE RISKS, DANGERS, AND HAZARDS OF THE CLUB PROGRAMS OR CLUB FACILITIES.

6. THE RELEASORS AGREE TO WAIVE ANY AND ALL CLAIMS AGAINST THE RELEASED PARTIES.

7. We represent, warrant and confirm that We: (a) are physically and mentally

WE HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, AND UNDERSTAND THAT WE ARE GIVING UP SUBSTANTIAL RIGHTS INCLUDING OUR RIGHT TO SUE THE RELEASED PARTIES AND OTHERS UNDER CERTAIN CIRCUMSTANCES. WE ACKNOWLEDGE THAT WE ARE SIGNING THIS AGREEMENT FREELY AND VOLUNTARILY. THE TERM OF THIS AGREEMENT IS INDEFINITE. THIS AGREEMENT IS BINDING ON US, OUR HEIRS, OUR EXECUTORS, OUR PERSONAL REPRESENTATIVES AND OUR ASSIGNS. WE HAVE BEEN GIVEN THE OPPORTUNITY TO SEEK INDEPENDENT LEGAL ADVICE BEFORE SIGNING THIS AGREEMENT, AND WE HAVE OBTAINED SUCH ADVICE OR VOLUNTARILY CHOSEN NOT TO DO SO.

Member Child Name: Colby Thornton

Custodial Parent / Legal Guardian Name: Guy Talley



Guardian Signature

Custodial Parent / Legal

SIGNATURE

Custodial Parent / Legal Guardian Signature:

Date : 28-11-2005



Programs Enrolled		
#	Programs	Locations
1	Afterschool Program Dovercourt	Stella Maris Catholic School

For Office Use Only

MEMBERSHIP FEE PAID: SK	PAYMENT METHOD: SK
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GROUP: SK	CLUB CARD NUMBER: SK
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AUTHORIZED ALTERNATIVE PICK-UP FORM		
MEMBER INFORMATION		
Last Name: Thornton	First Name: Colby	
Membership ID: BGC135		
ALTERNATIVE PICK UP #1		
Last Name: Allison	First Name: Bo	
Cell Phone: +1 (691) 592-6103	Relationship to Child: Esse aut tenetur sim	
ALTERNATIVE PICK UP #2		
Last Name: Bailey	First Name: Alma	
Cell Phone: +1 (767) 272-6167	Relationship to Child: Aut laborum Rerum a	

I acknowledge and agree that I am the custodial parent or legal guardian of the Child Member. As a custodial parent and/or legal guardian of the Child Member, I hereby consent to the Child Member being released to the Alternative Pick Up(s) listed above.

Signature:



Date: 28-11-2005