The eight-week program includes lunch, field trips, and bussing to and from the Club with several convenient stops throughout the City. (See registration form for available bus stops.)

Join us for a summer of fun!

STEM  Dance  Music  Swim
College Tours  Cooking Class  Sports Conditioning
Art  Yoga  Trips
Gardening  Career Exploration

Summer Basketball League
(Five-week program, beginning July 2)

Tuesday, Wednesday, Thursday
12:30pm - 3:30pm

Fees: $60*

*All participants must be a current member of the Boys & Girls Club of Pawtucket for the entire duration of the program.

For more information please visit:
www.bgcpawt.org or call 401.722.8840.
To learn more about the Boys & Girls Club of Pawtucket and all of our programs and services, please visit our website at: www.bgcpawt.org or contact us at 401.722.8840. To keep up-to-date on all the exciting things happening at the Club, follow us on our social media accounts below.

Boys & Girls Club of Pawtucket
One Moeller Place
Pawtucket, RI 02860
401.722.8840
2019 Teen Summer Program

Name: ______________________________________________________________ Date: ________________

Date of Birth: __________________________

Phone Number: _______________ E-mail Address: ____________________________

Home Address: __________________________________________________________________________

☐ Please enroll my child in the Teen Summer Program: June 24 – August 16, 2019
   $60.00* for the eight-week program running from 9:00am – 4:00pm, Monday – Friday

☐ Please enroll my child in the Teen Basketball Summer League (no additional fee is required):
   Tuesday, Wednesday, Thursday 12:30 – 3:30pm

Shirt Size: ☐ S  ☐ M  ☐ L  ☐ XL  ☐ XXL

Years of basketball experience: __________

School: _____________________________________________ Grade in September 2019: ______________

Emergency Contact Information

Primary Contact Name: _______________________Cell: ( ____ )_________ Work phone: ( ____ )_________
   (first & last name)

Secondary Contact Name: ____________________Cell: ( ____ )_________ Work phone: ( ____ )_________
   (first & last name)

Emergency Contact: __________________________ Phone/Cell: ( ____ )_________ Relationship __________
   (other than parent / guardian and over 18 years old)

Emergency Contact: __________________________ Phone/Cell: ( ____ )_________ Relationship __________
   (other than parent / guardian and over 18 years old)

Medical Information

Please list any medical restrictions, allergies, or dietary restrictions your child may have:__________________

________________________________________________________________________________________

Any condition now requiring regular medication? ☐ Yes  ☐ No  Name of medication: ____________________

________________________________________________________________________________________

Any restriction of activity for physical, emotional or psychological reasons? ☐ Yes  ☐ No  Explain: __________

________________________________________________________________________________________

Does your family have health and/or accident insurance: ☐ Yes  ☐ No
Family Health Plan Name: _______________________ Policy #: __________________ Group #: ______________

Permission for Treatment by Physician/Hospital: ☐ Yes ☐ No

Physician’s Name: ____________________________ Physician’s Phone: ( _____ ) ______________

My child has permission to participate in all activities, including off-site field trips and transportation, provided by the Boys & Girls Club of Pawtucket during the Teen Summer program. *All participants must have a current membership at the Boys & Girls Club of Pawtucket. **Must be registered for the Teen Summer Program to participate in the Summer Basketball League.

Transportation
☐ My child needs bus service (no additional fee is required):
  ☐ Pick-Up (AM) ☐ Drop-Off (PM)

Please select a stop from the following:

**Pawtucket Stops:**
☐ 560 Prospect Street ☐ Fairlawn
☐ Goff Middle School ☐ Jenks Middle School
☐ John Street Park (George Bennett HWY) ☐ Main Street (U-Haul)
☐ Shea High School ☐ Slater Middle School

**Central Falls Stop:**
☐ CF Jenks Park

Bus stops and pick-up times will be determined based on registrations. All bus stops are subject to change. There will be additional stops available for evening drop-off.

Additional stops may be requested – the Club will determine additional stops based on need.

Parent/Guardian Signature: ____________________________ Date: _________________

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**For Office Use Only**

Membership Current & Verified: ☐ Y ☐ N  Verified By: ___________

Registrations Fee Paid: ☐ Y ☐ N  Received By: ___________

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Please return Registration Form to:
Boys & Girls Club of Pawtucket
One Moeller Place, Pawtucket, RI 02860