

**ACTIVITY REGISTRATION
BOYS & GIRLS CLUB OF CLIFTON
2021 SPRING SEASON**

CLUB USE ONLY	
Payment	_____
Receipt #	_____
Memb Exp.	_____
Member #:	_____

Last Name _____ First _____ M.I _____

Male/Female (Circle)

Address _____ Date of Birth _____ Age _____

City _____ Zip _____ Home# _____ Cell # _____

Email Address _____

ACTIVITY (PLEASE CHECK APPROPRIATE BOX)

Basketball Clinic	Spring Basketball Boys	Volleyball (Coed)	Flag Football
3rd & 4th Grade _____	3rd & 4th Grade _____	Grades 3rd-5th _____	Age _____
5th & 6th Grade _____	5th & 6th Grade _____	Grades 6th-8th _____	Grade _____
7th & 8th Grade _____	7th & 8th Grade _____		

CIRCLE ONE: Beginner Experienced Traveling Player Years Played _____

Experience (where & how long)

Shirt Size _____

Email this completed card to info@bgcclifton.org
or print and place in mailbox (by the front entrance) at the Club 181 Colfax Ave.

Payment Due Upon Entry for Activity