



**ENROLMENT/REGISTRATION FORM
PARENT/GUARDIAN INFORMATION (PLEASE PRINT)
PLEASE COMPLETE ONE FORM PER CHILD**

Platform Registration

Regular Membership _____ Easter Retreat _____ Summer Camp _____
Community Service _____ School/Court Referral _____ Government Referral _____

Parent/Guardian 1 (please print)

Name: _____ Contact number: _____
E-mail address: _____
Place of employment: _____ Contact number: _____
Home address: _____
Work address: _____

Parent/Guardian 2 (please print)

Name: _____ Contact number: _____
E-mail address: _____
Place of employment: _____ Contact number: _____
Home address: _____
Work address: _____

Child Information (please print)

Name: _____ T-Shirt Size: _____
Date of birth: (dd/mm/yy) _____ Gender: _____
Name of school: _____ Grade: _____

Family Setting

_____ Both Parents _____ Grandparents _____ Single Parent _____ Legal Guardian

Child Medical Information (please print)

Insurance Provider: _____ Membership #: _____
Medications: _____
Medical Condition/Allergies: _____



P. O. Box 427 | Road Town, Tortola | VG1110 | Virgin Islands
Tel: (284) 340-9140 Email: male.bvi@gmail.com

IN CASE OF EMERGENCY

Contact # 1

Name: _____ Cell #: _____

Contact # 2

Name: _____ Cell #: _____

In the event that either Emergency Contact cannot be reached at the time of illness or accident, or the emergency is such that time doesn't permit such contact, we authorize M.A.L.E. to take our son/daughter _____ to the emergency room at the Government hospital/clinic and to alert the following physician of the emergency recognizing that M.A.L.E. and any person involved with M.A.L.E. does not assume responsibility for, nor do they have any liability for, the medical assistance and care which may ultimately be provided.

Physician's Name: _____ Telephone #: _____

Walk home or pick up Information (please print)

I authorized _____ (child) to walk home: ____ Yes ____ No

OR

To be pick up by anyone of the two – five people authorized listed below:

Name: _____ Contact number: _____

Relationship to child: _____

Name: _____ Contact number: _____

Relationship to child: _____

Name: _____ Contact number: _____

Relationship to child: _____

Name: _____ Contact number: _____

Relationship to child: _____

Name: _____ Contact number: _____

Relationship to child: _____



- a) I/We hereby agree to allow my child to be mentored by the guiding principles and statutes of the M.A.L.E. programme. I understand that this mentoring will include but is not limited to spiritual guidance according to the Bible and I do not object to the Godly instruction offered to my child.
- b) I/We hereby agree to participate in activities, counseling sessions, and fundraisers when necessary. (All given with reasonable time and consideration when asking.)
- c) I/We _____ as authorizing parent/legal guardian of _____, hereby acknowledge that I have read the mission, vision and focus and all information appertaining to the M.A.L.E. programme and agree to allow my child above-named to participate in the programme. I also agree that I will notify counselors of any session that I do not wish my child to participate in with proper notice acknowledging that failure to meet to minimum requirements for attendance may result in expulsion or additional work and time to make up for sessions lost.
- d) I/We hereby agree to provide my child with the minimum \$10 monthly as required for dues and participation in the M.A.L.E. programme. The fee covers snacks, drinks and the up keeping of maintenance of the MALE program.
- e) I/We hereby agree to be responsible for encouraging and ensuring that my/our child is properly uniformed for all sessions hosted by M.A.L.E. according to the uniform described and required.
- f) I/We hereby authorize M.A.L.E. to access and/or receive copies of my/our child's academic transcripts, interim reports, report cards, and standardized test scores in order to assist my son/daughter in achieving his/her educational goals. ____ Yes ____ No ____ Initial
- g) In order to keep your child enrolled in M.A.L.E., each parent/guardian is required to participate in (3) three mandatory programs deemed appropriate by M.A.L.E. each year. Failure to adhere will result in immediate removal of your child from M.A.L.E.
- h) I/We have read the complete application, understand the rules of M.A.L.E and request that my son/daughter be admitted into membership. I have explained the rules to my son/daughter and agree that M.A.L.E. will not be responsible for any accidents to my child while on M.A.L.E.'s locations/meeting point or while engaged in any of its activities away from M.A.L.E. I give consent for photographs, in which my son/daughter may appear, to be used in any way M.A.L.E. may care to use them.

I understand that this completed form must be in the possession of M.A.L.E. prior to participation in this programme.

Parent/Guardian Signature

Child Signature

Date



- i) By signing below, I grant M.A.L.E., and its subsidiaries, affiliates, and successors the right to use my child's name, likeness, voice and personal testimonials as captured on video, picture, portrait and any images, audiotapes, videotapes and or interviews of me taken or recorded (including edited version thereof) (the recorded materials) in any manner for the purpose of education, training, advertising, trade or any other lawful purpose whatsoever, in print or electronic form and in any media now known or ever developed.
- j) I/We grant and assign to M.A.L.E. all right, title and interest in any recordings, including, without limitation, copyright. I confirm that I have the right to enter into this agreement and that neither M.A.L.E. has an obligation to pay me for the recorded materials. I waive all my rights to review and approve the finished product as used by M.A.L.E. and I understand that M.A.L.E. is not obligated to use any of the recorded materials.
- k) I/We grant permission for my child to be taken on field trips while being transported in an M.A.L.E. vehicle or another licensed vehicle for field trips and other youth related events. These trips will be adequately supervised and my permission for my child to participate will be granted via written, or verbal (telephone) confirmations.
- l) I/We hereby commit to transporting my child to and from M.A.L.E. sessions when possible and to notify M.A.L.E. when assistance with transportation is necessary.
- m) I release and agree to hold harmless M.A.L.E. and anyone acting under M.A.L.E.'s permission, from any liability (including, without limitation, claims for invasion or of privacy or right of publicity) for any injury that may occur to me in connection with the recorded materials or for M.A.L.E. exercise of its rights granted under this agreement, except for liability for being intentionally cast in a bad light.
- n) This agreement represents my entire understanding with M.A.L.E. I have read this agreement prior to signing it, and I understand its contents. This agreement may not be amended unless M.A.L.E. and I agree in writing. If this is a consent and release for a minor, I warrant that I am the legal guardian of the minor named below and have every right to contract for him / her in the above regard.

Date

Print Minor's Name

Printed Name of Parent / Guardian 1

Printed Name of Parent / Guardian 2

Parent's Signature 1

Parent's Signature 2