



Boys & Girls Club of Alton
Member Update Information

Name: _____ Age: _____ D.O.B. _____
Phone #: _____ School: _____
Address: _____ Grade: _____
City: _____ Will your son/daughter need to ride the bus to the club?
State: _____ Yes: _____ No: _____

Emergency Contact 1

Name Relationship Phone Number

Emergency Contact 2

Name Relationship Phone Number

Additional Notes:

Staff Signature

Date