



GREAT FUTURES START [HERE](#).



BGC RUSH Soccer Application

Applications must be submitted to Site Directors by Wednesday, March 15th.

Member Information

Name: _____ (First) (Last) (Middle Initial)
Address: _____
City: _____ State: _____ Zip Code: _____
Phone: _____ Parent(s)/Guardian: _____

Boys & Girls Club Membership Information

Site(s) Member Attends: _____
Length of Membership: _____
Club Activities: _____

School Information

School: _____	Grade: _____
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Extracurricular Activities

Please list any extracurricular activities you participated in (community, school, church, ect). _____ _____
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Short Essay Questions

Write a short essay answering the following questions. Please print and limit your response to the space provided.
1. Why should you be selected for the BGC Rush Soccer Program? _____ _____ _____
2. What kind of impact would the BGC RUSH Soccer program have on you? _____ _____ _____

If selected for participation, I commit to attend the Soccer Clinic on Wednesday, March 22 nd along with all program practices & games with a positive and respectful attitude.
Members Signature: _____ Date: _____