

## Boys & Girls Club of the Southern Ute Indian Tribe Registration Card

## School Year Fall 2025

Members Last Name:	Members First Name:	
Age: Current Grade :		
Please list any changes to your club m	embers registration packet: (contact info/authorized pi	ckup/medical/etc.)
Please check if there are no ch	nanges to your club member's registration packet.	
Parent/Guardian Name:	<del></del>	
Signature:		
Date		Want out
Boys & Girls Clu	ıb of the Southern Ute Indian Tribe	School Year
<u> </u>	Registration Card	Fall 2025
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Parent/Guardian Name:\_\_\_\_\_

Date \_\_\_\_\_

