



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 members registration packet: (contact info/authorized pickup/medical/etc.)

Please check if there are no changes to your club member's registration packet.

Parent/Guardian Name: _____

Signature: _____

Date _____



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