



**BOYS & GIRLS CLUB**  
OF LANGLADE COUNTY

**2017-2018 BGC Afterschool Busing Registration**

**If registration is turned in and paid in full for the year by 8-31-2017, your child will receive a free annual membership.**

Once again, we will be transporting students from **Crestwood, North, West, Peace Lutheran, Pleasant View, and Spring Valley** to the Boys & Girls Club. Transportation from school to the Boys & Girls Club will start, September 5<sup>th</sup> 2017.

- \_\_\_\_\_ **Option 1:** Lump Sum payment is \$260.00 for the first child and \$160.00 for each additional child.
- \_\_\_\_\_ **Option 2:** Monthly payments of \$40.00 for each child in the family. The first monthly payment must be attached at the time of registration. Billing statements will be sent to you monthly.

It will be the parent's responsibility to call the Boys & Girls Club by 12.00pm, if your child will or will not be riding the bus on a day that they were or were not scheduled to ride. This is not a school based program and schools will not be responsible for keeping track of your child. **Please do not call your child/rens school for any changes, call the Boys & Girls Club at our number of 715-627-1389 Ext 2 before 12:00pm or e-mail us at [memberships@bgclang.org](mailto:memberships@bgclang.org)**

Disrespect to the bus driver and other students will not be tolerated on the bus. Transportation for your child can and will be suspended if there are repeated respect/behavior problems. **All fees are non-refundable.**

**BUSING PHONE NUMBER: 715-627-1389 Ext. 2 or e-mail us at [memberships@bgclang.org](mailto:memberships@bgclang.org)**

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School: \_\_\_\_\_ Grade: \_\_\_\_\_ Parent Email: \_\_\_\_\_

Student Name: \_\_\_\_\_ Parent Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

My child will ride the bus the following days: Mon \_\_\_ Tues \_\_\_ Wed \_\_\_ Thurs \_\_\_ Fri \_\_\_

**\*\*I grant permission for my child to participate in the afterschool transportation program. I understand that if my child is hurt during the program, it is not the responsibility of the Boys & Girls Club, or the bus company. I understand that it is my responsibility to notify the BGC by 12pm at 715-627-1389 Ext 2, if my child/ren will or will not be riding the bus on a day they were/were not scheduled to ride. I have spoke with my child/children about respect/behavior that will be expected on the bus and understand that any ongoing problems may result in my child/ren not being able to ride the bus. I understand my child's busing service can be revoked if my monthly payment is 2 weeks past due.**

PARENT SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this form along with payment to The Boys & Girls Club, 411 Superior Street, Antigo WI, 54409.**

**\*\*\*Please note that we now accept Mastercard, Visa or Discover payments. \*\*\***